10/14/2006 10:28

Image# 26950562146

## **FEC** FORM 3X

Only

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines **HCR Manor Care PAC** 333 North Summit Street ADDRESS (number and street) 16th Floor Check if different than previously Toledo OH 43604 2617 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. CITY A ZIPCODE A IS THIS **AMENDED** NEW C00260141 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Χ Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 07 0 1 2006 09 3 0 2006 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Frank A Jannazo Type or Print Name of Treasurer Electronically Filed by Frank A Jannazo 10 14 2006 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003)

## Image# 26950562147

## SUMMARY PAGE OF RECEIPTS AND DISRUBSEMENTS

OF RECEIPTS AND DISBURSEMENTS
Page 2(2003)

	FEC Form 3X (Rev. 02/2003)		Page 2
٧	Vrite or Type Committee Name HCR Manor Care PAC		
F	Report Covering the Period: From:	01 2006	To: 0 9 3 0 2 0 0 6
	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1  Y2006		122561.74
	(b) Cash on Hand at Begining of Reporting Period	118332.92	
	(c) Total Receipts (from Line 19)	36144.55	117511.06
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	154477.47	240072.80
7.	Total Disbursements (from Line 31)	93983.24	179578.57
8.	Cash on Hand at Close of		
	Reporting Period (subtract Line 7 from Line 6(d))	60494.23	60494.23
9.	Debts and Obligations owed TO		
	the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

## For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

## DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name HCR Manor Care PAC

Report Covering the Period:

м м 0 7

From:

01

<sup>Y</sup> 2 0 0 6

0 9 O

<sup>D</sup> 3<sup>D</sup> 0

2006

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	22930.35	61161.20
	(ii) Unitemized	8045.31	50719.27
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	30975.66	111880.47
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	30975.66	111880.47
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
	to Federal candidates and Other Political Committees	5000.00	5000.00
17.	Other Federal Receipts (Dividends, Interest, etc.)	168.89	630.59
18.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	36144.55	117511.06
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	36144.55	117511.06

## **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

(i) Federal Share.....

(ii) Non-Federal Share.....

Expenditures.....

Committees.....

Federal Candidates/Committees.....and Other Political Committees.....

26. Loan Repayments Made.....

Individuals/Persons Other

(such as PACs) .....

(b) Political Party Committees (c) Other Political Committees

(d) Total Contribution Refunds

29. Other Disbursements.....

30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity

(i) Federal Share .....

(ii) "Levin" Share ..... (b) Federal Election Activity Paid Entirely

With Federal Funds ..... (c) Total Federal Election Activity (add

31. Total Disbursements (add Lines 21(c), 22,

32. Total Federal Disbursements

from Line 31).....

23, 24, 25, 26, 27, 28(d), 29 and 30(c))..

(subtract Line 21(a)(ii) from Line 30(a)(ii)

Lines 30(a)(i), 30(a)(ii) and 30(b))....

(from Schedule H6)

**II. DISBURSEMENTS** 

(a) Shared Federal/Non-Federal Activity (from Schedule H4)

(b) Other Federal Operating

22. Transfers to Affiliated/Other Party

Contributions to

24. Independent Expenditure

27. Loans Made..... 28. Refunds of Contributions To:

23.

(c) Total Operating Expenditures

21. Operating Expenditures:

of Disbursements Page 4 **COLUMN A COLUMN B Total This Period** Calendar Year-to-Date 0.00 0.00 0.00 0.00 208.24 553.57 208.24 553.57 (add 21(a)(i), (a)(ii) and (b))............ 0.00 0.00 70575.00 124075.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 Than Political Committees ..... 0.00 0.00 0.00 0.00 0.00 0.00 (add Lines 28(a), (b), and (c)) ......... 23200.00 54950.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 93983.24 179578.57

93983.24

179578.57

## **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
otal Contributions (other than loans) om Line 11(d), page 3)	30975.66	111880.47
 otal Contribution Refunds om Line 28(d))	0.00	0.00
et Contributions (other than loans) ubtract Line 34 from Line 33)	30975.66	111880.47
otal Federal Operating Expenditures dd Line 21(a)(i) and Line 21(b))	208.24	553.57
fsets to Operating Expenditures om Line 15, page 3)	0.00	0.00
t Operating Expenditures ubtract Line 37 from Line 36)	208.24	553.57

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 6 / 61		
	`		Use separate schedule(s) or each category of the	(check only one)		
11	EMIZED RECEIPTS		Detailed Summary Page	X   11a   11b   11c   12		
				13 14 15 16 17		
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements may name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
$\setminus$	NAME OF COMMITTEE (In Full)					
	HCR Manor Care PAC					
Α.	Full Name (Last, First, Middle Initial) Martin D Allen			Date of Receipt		
	Mailing Address 7151 Whispering Oak			09 20 7 2006		
	City	State	Zip Code	Transaction ID: SA11A1.25815		
	Sylvania	OH	43560	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		300.00		
	Name of Employer HCR ManorCare Inc.	Occupation AVP / Dir	n Internal Aud & Risk	Biweely payroll deduction - \$50		
	Receipt For:		e Year-to-Date ▼			
	Primary General		550.00	7		
	Other (specify) ▼	0 0	550.00			
В.	Full Name (Last, First, Middle Initial) Steven A Antokal			Date of Receipt		
	Mailing Address 11741 NW 1st St			07 26 2006		
	City	State	Zip Code	Transaction ID: SA11A1.25818		
	Coral Springs	<u>FL</u>	33071	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		42.00		
	Name of Employer	Occupation	1	Biweekly Payroll deduction - \$14		
	HCR ManorCare Inc.	Corp Ent	rostomal Therapist			
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General	' '	210.00	7		
	Other (specify)	0 0				
C.	Full Name (Last, First, Middle Initial) Lisa Arnold			Date of Receipt		
	Mailing Address 36832 Meadow Creek (	Ct		07 12 7 2006		
	City	State	Zip Code	Transaction ID: SA11A1.25822		
	Magnolia	<u>TX</u>	77355	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		40.00		
	Name of Employer HCR ManorCare Inc.	Occupation Sr Admin		Payroll deduction		
			e Year-to-Date ▼			
	Primary General		280.00	7		
	Other (specify) ▼	0 0	280.00	_		
s	UBTOTAL of Receipts This Page (optional)			382.00		
$\vdash$	· · · · · · · · · · · · · · · · · · ·					
T	OTAL This Period (last page this line number of	only)				

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 7/61
	EMIZED RECEIPTS		or each category of the	(check only one)
••	EMIZED REGEN 10		Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   17
Ar	ny information copied from such Reports and St for commercial purposes, other than using the	atements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
V .		name and add	aress or arry political committee to	Solicit Contributions from Such Committee.
$ \rangle$	NAME OF COMMITTEE (In Full) HCR Manor Care PAC			
	Full Name (Last, First, Middle Initial)			
A.				Date of Receipt
	Mailing Address 428 169th Court NE			09 20 2006
	City	State	Zip Code	Transaction ID: SA11A1.25831
	Bradenton	FL	34212	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		315.00
	Name of Employer HCR ManorCare Inc.	Occupation	n Director of Operation	Biweely payroll deduction - \$45
	Receipt For:		e Year-to-Date ▼	
	Primary General	33 - 3		1
	Other (specify) ▼	0 0	693.40	
В.	Full Name (Last, First, Middle Initial) Charles Batcher			Date of Receipt
	Mailing Address 910 Orchard Drive			07 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.25833
	Rossford	OH	43460	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer HCR Manor Care, Inc.	Occupation Director	n - Dementia Services	Payroll deduction
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		050.00	1
	Other (specify) ▼	0 0	650.00	
C.	Full Name (Last, First, Middle Initial) Karen F Bell			Date of Receipt
•	Mailing Address 1220 North St.			M M / D D / Y Y Y Y
				09 20 2006
	City	State	Zip Code	Transaction ID: SA11A1.25840
	Bowling Green	OH	43402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		115.38
	Name of Employer HCR ManorCare Inc.	Occupation AVP^ Dir	n Clinical Services	Biweekly payroll deduction - \$19.23
		e Year-to-Date ▼		
	Primary General	1 1	201.20	1
	Other (specify) ▼		381.38	
s	UBTOTAL of Receipts This Page (optional)			480.38
$\vdash$			<u> </u>	-
T	OTAL This Period (last page this line number of	only)		

S	CHEDULE A (FEC Form 3X)		Llaa aanarata aahadula(a)	FOR LINE NUMBER: PAGE 8 / 61
ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the		(check only one)
•••	LIMIZED RECEIP 13		Detailed Summary Page	X   11a   11b   11c   12
				13 14 15 16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	rnot be sold or used by any pers ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
	HCR Manor Care PAC			
A.	Full Name (Last, First, Middle Initial) Pamella S Britt			Date of Receipt
	Mailing Address 27135 State Rt 49			09 13 2006
	City	State	Zip Code	Transaction ID: SA11A1.25850
	Potomac	IL	61865	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer HCR ManorCare Inc.	Occupation Administr		Biweely payroll deduction - \$50
	Receipt For:		Year-to-Date ▼	
	Primary General			7
	Other (specify) ▼	0 0	780.00	
В.	Full Name (Last, First, Middle Initial) Timothy N Burchill			Date of Receipt
	Mailing Address 1121 6th Street SW		09 20 2006	
	City	State	Zip Code	Transaction ID: SA11A1.25852
	Minot	ND	58701	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		120.00
	Name of Employer HCR ManorCare Inc.	Occupation Administr		Biweely payroll deduction - \$20
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		260.00	
<u> </u>	Full Name (Last, First, Middle Initial) David Burke			Date of Receipt
	Mailing Address 3908 Trickling Brook Dr.			07 20 Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.25671
	Richmond	VA	23228	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		300.00
	Name of Employer HCR ManorCare Inc.	Occupation Administr		Contribution - Credit Card
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
s	UBTOTAL of Receipts This Page (optional)			720.00
	OTAL This Period (last page this line number on	L A		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER:	PAGE 9/61
ITEMIZED RECEIPTS			or each category of the	(check only one)	
TI LIVIIZED TIEGEII TO			Detailed Summary Page	X 11a 11b	11c   12
_	., ., ., ., ., ., ., ., ., ., ., ., ., .		13 14	15 16 17	
Ar	ly information copied from such Reports and St for commercial purposes, other than using the	atements may name and add	/ not be sold or used by any perso dress of any political committee to	n for the purpose of solic solicit contributions from	sting contributions such committee.
	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , , ,		
$  \rangle$	HCR Manor Care PAC				
	Tiert Marier Gare 1716				
_	Full Name (Last, First, Middle Initial)				
A.	Kim Elaine Byk			Date of Receipt	
	Mailing Address 2202 Liberty St. South			09 20	
	City	State	Zip Code	Transaction ID: S	
	Canton		48188	Amount of Each R	
		MI	+0100	Amount of Lacri A	eceipt triis Feriod
	FEC ID number of contributing federal political committee.	C			210.00
				Biweely payroll do	eduction
	Name of Employer HCR ManorCare Inc.	Occupation		- \$35	Saaction
			ical Support Systems		
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼		
	Other (specify)		420.00		
	Calci (opeany) 🔻		1 1 1 1 1 1 1		
_	Full Name (Last, First, Middle Initial)				
В.	Charlie F Byrne			Date of Receipt	
	Mailing Address 4685 Rio Poco Court			M M / D D	
	0	State		07 26	
	City		Zip Code	Transaction ID: S	
	Naples	<u>FL</u>	33109	Amount of Each R	eceipt this Period
	FEC ID number of contributing federal political committee.	C			75.00
	rederai politicai committee.				
	Name of Employer HCR ManorCare Inc.	Occupation	n	Biweekly payroll of 25	deduction
		Sr Admin	nistrator		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		375.00		
	Other (specify)	0 0			
_	Full Name (Last, First, Middle Initial)				
C.				Date of Receipt	
	Mailing Address 38 Bentley Court			M M / D D	
				09 20	
	City	State	Zip Code	Transaction ID: S	A11A1.25856
	Bedminster	NJ	07921	Amount of Each R	eceipt this Period
	FEC ID number of contributing	С			80.78
	federal political committee.				
	Name of Employer	Occupation	n	Biweely payroll do - \$11.54	eduction
	HCR ManorCare Inc.  Receipt For:		rator	<b>V</b>	
			e Year-to-Date ▼		
Primary General Other (specify) ▼			219.26		
			213.20		
_	IIDTOTAL of Descints Title Boss (setting)				365.78
լ s	UBTOTAL of Receipts This Page (optional)		······		
_	OTAL This Period (last page this line number of	only)	<b>.</b>		
	· · · · · · · · · · · · · · · ·	,	······		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 10 / 61	
ITEMIZED RECEIPTS			or each category of the	(check only one)	
••			Detailed Summary Page	X   11a   11b   11c   12   15   16   17	
Δr	y information copied from such Reports and St	atements may	y not he sold or used by any ners		
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.	
$\setminus$	NAME OF COMMITTEE (In Full)				
$ \rangle$	HCR Manor Care PAC				
$\mathbb{Z}$	Full Names (Lost First Middle Initial)				
A.	Full Name (Last, First, Middle Initial) Vickie Canter			Date of Receipt	
	Mailing Address 17514 Lethridge Circle			M M / D D / Y Y Y Y	
	-			07 05 2006	
	City	State	Zip Code	Transaction ID: SA11A1.25860	
	Round Hill	VA	20141	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		20.00	
	rederal political committee.			Devel deduction	
	Name of Employer HCR ManorCare Inc.	Occupation		Payroll deduction	
			r Of Nursing Serv		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify)	' '	280.00		
		1 1		-	
	Full Name (Last, First, Middle Initial)				
В.	Javier Cavero			Date of Receipt	
	Mailing Address 3077 N. Oakland Fores	t Dr. #202		09 20 2006	
	City	State	Zip Code	Transaction ID: SA11A1.25866	
	Oakland Park	FL	33309	Amount of Each Receipt this Period	
	FEC ID number of contributing		1 1 1 1 1		
	federal political committee.	C		195.39	
	Name of Employer	Occupation	<u> </u>	Biweely payroll deduction	
	HCR ManorCare Inc.	Administr		- \$30	
	Receipt For:		Year-to-Date ▼		
	Primary General		000.07	1	
	Other (specify)	0 0	380.07		
C.	Full Name (Last, First, Middle Initial) Mr. William Chenevert			Date of Receipt	
	Mailing Address 620 Ashbury Drive			M M / D D / Y Y Y Y	
				09 20 2006	
	City	State	Zip Code	Transaction ID: SA11A1.25867	
	Perrysburg	OH	43551	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		461.58	
	Tederal political committee.			Dividely payrell deduction	
	Name of Employer HCR.ManorCare, Inc.	Occupation		Biweely payroll deduction - \$76.93	
			sident, Operations Support	_	
			e Year-to-Date ▼	-	
Other (specify) ▼			931.58		
				1	
				2=0.0=	
s	UBTOTAL of Receipts This Page (optional)			676.97	
T	OTAL This Period (last page this line number of	only)			

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 / 61
	EMIZED RECEIPTS		or each category of the	(check only one)
••			Detailed Summary Page	X   11a   11b   11c   12   15   16   17
Δη	y information copied from such Reports and St	atements may	not be sold or used by any pers	
or	for commercial purposes, other than using the	name and add	lress of any political committee to	o solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
	HCR Manor Care PAC			
Α.	Full Name (Last, First, Middle Initial)			Data of Descipt
A.	Ms Lisa Cherry  Mailing Address 1971 A Allwood Drive			Date of Receipt
				09 20 2006
	City	State	Zip Code	Transaction ID: SA11A1.25868
	Bethlehem	PA	18018	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		103.86
	Name of Employer HCR Manor Care, Inc.	Occupation		Biweely payroll deduction - \$17.31
		Administr		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	7
	Other (specify) ▼		294.21	
В.	Full Name (Last, First, Middle Initial) Ms Denise Clements			Date of Receipt
	Mailing Address 16953 S. Mohican Drive	e		M M / D D / Y Y Y
	0::	State	7: 0 1	07 19 2006
	City		Zip Code	Transaction ID: SA11A1.25871
	Lockport	IL	60441	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer	Occupation	1	Payroll deduction
	HCR Manor Care, Inc.		rator - Oak Lawn West	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify)		225.00	
	Curior (openity)	0 0		-
C.	Full Name (Last, First, Middle Initial) Stephen Coetzee			Date of Receipt
	Mailing Address PO Box 85			09 20 2006
	City	State	Zip Code	Transaction ID: SA11A1.25872
	Neport	PA	17074	Amount of Each Receipt this Period
	FEC ID number of contributing			120.00
	Name of Employer HCR. Manor Care  Occupation Administ			120.00
			1	Biweely payroll deduction - \$20
				<b>420</b>
			Year-to-Date ▼	
			331.55	1
			3333	1
Г				253.86
S	UBTOTAL of Receipts This Page (optional)			253.00
	OTAL This Period (last page this line number of	nnlv)	-	
1 ''		/··· <b>y</b> / ······		

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	ly information copied from such Reports and Stater for commercial purposes, other than using the nam	nents may ne and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full) HCR Manor Care PAC			
Α.	Full Name (Last, First, Middle Initial) Shawn P Corley			Date of Receipt
	Mailing Address 4009 Top Flite Lane			M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O
	City	State	Zip Code	Transaction ID: SA11A1.25873
	Mason	ОН	45040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		240.00
	HCR ManorCare Inc	Occupation Regional	Director of Operation	Biweely payroll deduction - \$40
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 520.00	
В.	Full Name (Last, First, Middle Initial) Ms Pamela Cox			Date of Receipt
	Mailing Address 6238 Shadowood Circle	09 20 2006		
	City	State	Zip Code	Transaction ID: SA11A1.25877
	Naples	FL	34112	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		150.00
	HCR ManorCare Inc	Occupation Administi		Biweely payroll deduction - \$25
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		325.00	
<u>с.</u>	Full Name (Last, First, Middle Initial) Douglas S Crail			Date of Receipt
	Mailing Address 5704 Ashbrook Drive			09 20 YYYYY 2006
	City	State	Zip Code	Transaction ID: SA11A1.25879
	Toledo	OH	43614	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		175.00  Biweely payroll deduction
	UCD ManorCaro Inc	Occupation Dir. Qual	n ity Mgmt	- \$25
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 475.00	
s	UBTOTAL of Receipts This Page (optional)			565.00
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 13 / 61					
ıт	EMIZED RECEIPTS		or each category of the	(check only one)					
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or	ly information copied from such Reports and Statement for commercial purposes, other than using the name an	nd add	dress of any political committee to	solicit contributions from such committee.					
$\setminus$	NAME OF COMMITTEE (In Full)								
$  \rangle$	HCR Manor Care PAC								
$\angle$									
	Full Name (Last, First, Middle Initial)			B. (B. )					
Α.	Victoria A Crenshaw			Date of Receipt					
	Mailing Address 736 Virginia Dare Dr			07 26 2006					
	City Sta	ite	Zip Code	Transaction ID: SA11A1.25881					
	Virginia Beach VA		23451	Amount of Each Receipt this Period					
	FFO ID work and found the firm								
	federal political committee.			75.00					
				Biweekly payroll deduction					
	UCD ManorCaro Ino	ipatio		- \$25					
			Director of Operation Year-to-Date ▼	_					
	Primary General	egaic	Flear-to-Date V	1					
	Other (specify)		375.00						
		-							
	Full Name (Last, First, Middle Initial)								
В.	Jamie S D'Angelo			Date of Receipt					
	Mailing Address 26 Oakland Ave			07 26 YYYY 2006					
	City Sta	ıto.	Zip Code						
	Wheeling W\		26003	Transaction ID: SA11A1.25885					
		v	20003	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.			60.00					
				Biweekly payroll deduction					
	HCR ManorCare Inc	ıpatio		- \$20					
	Adm	inist							
	Receipt For: Aggr	regate	Year-to-Date ▼						
	Other (specify)		300.00						
	Suiter (opcorry) 🔻	0	1 1 1 1 1 1 1	1					
	Full Name (Last, First, Middle Initial)								
C.	Linda J Dailey			Date of Receipt					
	Mailing Address 126 Cornerstone Dr.			0 8 2 3 2 0 0 6					
	City Sta	+ o	Zip Code						
	Marietta OF		45750	Transaction ID: SA11A1.25884  Amount of Each Receipt this Period					
		_	+3730	Amount of Lacif Necept this Period					
	FEC ID number of contributing federal political committee.			80.00					
				Payroll deduction					
	HCR ManorCare Inc	ıpatio		T dyron doddonon					
	Adm	ninist		_					
	Receipt For:  Primary General  Aggr	regate	Year-to-Date ▼						
	Other (specify)		340.00						
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions of for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full) HCR Manor Care PAC  Full Name (Last, First, Middle Initial) A. disercial Darwine Mailing Address 122 13th Ave. N.  City State Zip Code Casselton ND s8012 FEC ID number of contributing foderal political committee.  Name of Employer HCR Manor Care inc.  Primary General Other (speality) ▼	•				
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of solding contributions of or commending purposes, other than using the name and address of any political committee to solidit committee.  NAME OF COMMITTEE (in Full) HCR Manor Care PAC  Full Name (Last, First, Middle Initial) A. Glenice I Davin Mailing Address 122 13th Ave. N.  City State Zip Code Transaction ID: SA11A1.25887  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care Inc.  Cilinical Services ConsultantRN Receipt For: Primary General Other (specify ▼ 228.86  FEC ID number of contributing federal political committee)  B. Karen L Davison Mailing Address 612 W, Magnolila  City State Zip Code Transaction ID: SA11A1.25887  FEC ID number of contributing federal political committee.  City State Zip Code Transaction ID: SA11A1.25887  FEC ID number of contributing federal political committee.  City State Zip Code Transaction ID: SA11A1.25888  FEC ID number of contributing federal political committee.  City State Zip Code Transaction ID: SA11A1.25888  FEC ID number of contributing federal political committee.  City State Zip Code Transaction ID: SA11A1.25888  FEC ID number of contributing federal political committee.  City State Zip Code Transaction ID: SA11A1.25889  Date of Receipt Inc.  Biveely payroll deduction  Biveely payroll deduction  Biveely payroll deduction  State Zip Code Transaction ID: SA11A1.25890  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City Daniel W Dolitical III  Mailing Address 541 S 61st Street  City Daniel W Dolitical III  Mailing Address 541 S 61st Street  City Daniel W Dolitical III  Mailing Address 541 S 61st Street  City Daniel W Dolitical III  Mailing Address 541 S 61st Street  City Daniel W Dolitical III  Mailing Address 541 S 61st Street  City Daniel W Dolitical III  Mailing Address 541 S 61st Street  City Daniel W Dolitical III  Mailing Address 541 S 61st Street  City Daniel W D	••			Detailed Summary Page	
NAME OF COMMITTEE (in Full) HCR Manor Care PAC  Full Name (Last, First, Middle Initial) Clay State Zip Code ND 58912  FEU Number of contributing federal political committee.  Name of Employer HCR Manor Care in Clinical Services ConsultantRN Railing Address 612 W. Magnollia  City State Zip Code ND 58912  FEU Number of Contributing federal political committee.  Full Name (Last, First, Middle Initial) City State Zip Code Pana IL 68557  FEU I Number of contributing federal political committee.  Full Name (Last, First, Middle Initial) City State Zip Code Pana IL 68557  FEU I D number of contributing federal political committee.  Name of Employer HCR Manor Care in C.  Pirmary General Other (specify)  Quantity Decared In C.  Pirmary General Other (specify)  Quantity Decared In C.  Pirmary General Other (specify)  Quantity Decared In C.  Recopit For: Daniel W Decared In C.  Name of Employer HCR Manor Care in C.  Pirmary General Other (specify)  Quantity Decared In C.  Name of Employer HCR Manor Care in C.  Name of Employer	Δr	ny information conied from such Reports and St	atemente may	y not he sold or used by any ners	
HCR Manor Care PAC  A collected brainin A collected brainin Mailing Address 122 13th Ave. N.  City State Zip Code ND 58012  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care inc.  Primary General Other (specify) ▼ Cocupation City State Zip Code Transaction ID: SA11A1.25887 Amount of Each Receipt this Period  FEC ID number of contributing (City State Zip Code III. Brain Law/Signor)  Full Name (Last, First, Middle Initial)  B. Karen L Davidson Maling Address 612 W. Magnolia City State Zip Code III. Ge557  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care inc.  Name of Employer HCR Manor Care inc.  Name (Last, First, Middle Initial)  C. Daniel W Detized III Mailing Address 541 S 61st Street  City State Zip Code ID: State Zip Code ID: State St	or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) A. Glenice I Darwin Mailing Address 122 13th Ave, N.  City Cassetton ND 58912 FEC ID number of contributing federal political committee.  City Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) B. Karen L Darwiscon Mailing Address 612 W. Magnolia  City State Pana IL 62557 FEC ID number of contributing federal political committee.  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) B. Karen L Darwiscon Mailing Address 612 W. Magnolia  City State Pana IL 62557 FEC ID number of contributing federal political committee.  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) C. Daniel Medical first Street  City State Zip Code Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) C. Daniel Medical first Street  City Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) C. Daniel Medical first Street  City Primary General Other (specify) ▼  City State Zip Code PA 17111  FEC ID number of contributing federal political committee.  City State Zip Code PA 17111  Amount of Each Receipt Medical Initial) C. Daniel Webital III Mailing Address 541 S 61st Street  City Primary General Other (specify) ▼  State Zip Code PA 17111  Amount of Each Receipt Medical Initial) Amount of Each Receipt Medical Initial  Date of Receipt  State Signature  State Signatur	$\setminus$	NAME OF COMMITTEE (In Full)			
A. Glerice I Darwin  Mailing Address 122 13th Ave. N.  City  Casselton  ND  S8012  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Name of Employer HCR ManorCare Inc.  Name of Employer HCR ManorCare Inc.  Perinary  General  Other (specify) ▼  State  Zip Code IL  G28.86  City  State  Dianount of Each Receipt this Period  Transaction ID: SA11A1.25888  Amount of Each Receipt  Transaction ID: SA11A1.25888  Amount of Each Receipt  Transaction ID: SA11A1.25888  Amount of Each Receipt Transaction ID: SA11A1.25888  Amount of Each Receipt Transaction ID: SA11A1.25888  Amount of Each Receipt Transaction ID: SA11A1.25888  Transaction ID: SA11A1.25888  Transaction ID: SA11A1.25888  Amount of Each Receipt Transaction ID: SA11A1.25888  Transaction ID: SA11A1.25888  Transaction ID: SA11A1.25888  Amount of Each Receipt Transaction ID: SA11A1.25888  Transaction ID: SA11A1.25888  Amount of Each Receipt Transaction ID: SA11A1.25888  Transaction ID: SA11A1.25889  Transaction ID: SA11A1.25890  Transa	$ \rangle$	HCR Manor Care PAC			
A. Glerice I Darwin  Mailing Address 122 13th Ave. N.  City  Casselton  ND  S8012  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Name of Employer HCR ManorCare Inc.  Name of Employer HCR ManorCare Inc.  Perinary  General  Other (specify) ▼  State  Zip Code IL  G28.86  City  State  Dianount of Each Receipt this Period  Transaction ID: SA11A1.25888  Amount of Each Receipt  Transaction ID: SA11A1.25888  Amount of Each Receipt  Transaction ID: SA11A1.25888  Amount of Each Receipt Transaction ID: SA11A1.25888  Amount of Each Receipt Transaction ID: SA11A1.25888  Amount of Each Receipt Transaction ID: SA11A1.25888  Transaction ID: SA11A1.25888  Transaction ID: SA11A1.25888  Amount of Each Receipt Transaction ID: SA11A1.25888  Transaction ID: SA11A1.25888  Transaction ID: SA11A1.25888  Amount of Each Receipt Transaction ID: SA11A1.25888  Transaction ID: SA11A1.25888  Amount of Each Receipt Transaction ID: SA11A1.25888  Transaction ID: SA11A1.25889  Transaction ID: SA11A1.25890  Transa	<u></u>	Full Name (Last First Middle Initial)			
City State Zip Code ND S8012  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Name of Employer Aggregate Year-to-Date ▼  Primary General Unite (seeight Inc.)  Name of Employer Aggregate Year-to-Date ▼  Primary General Unite (seeight Inc.)  Name of Employer Aggregate Year-to-Date ▼  Primary General Unite (seeight Inc.)  Full Name (Last, First, Middle Initial)  Name of Employer HCR ManorCare Inc.  Name of Employer HCR ManorCare Inc.  Name of Employer HCR ManorCare Inc.  Primary General Unite (seeight Inc.)  Primary General Unite (seeight Inc.)  Clinical Services  Aggregate Year-to-Date ▼  Primary General Unite (seeight Initial)  C Date of Receipt Inc.  Primary General Unite (seeight Initial)  C Date of Receipt Inc.  Primary General Unite (seeight Initial)  C Date of Receipt Inc.  Primary General Unite (seeight Initial)  C Date of Receipt Inc.  Primary General Unite (seeight Initial)  C Date of Receipt Inc.  Name of Employer HCR ManorCare Inc.  Name of Employer Aggregate Year-to-Date ▼  Primary General Unite Primary General Unite (seeight Initial)  C Date of Receipt Inc.  Name of Employer Inc.  Administrator  Administrator  Receipt For: Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  State Zip Code Inc.  Name of Employer Inc.  Administrator  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  State Zip Code Inc.  Administrator  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Substotal of Receipt Inc.  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Substotal of Receipt Inc.  Aggregate Year-to-Date ▼  Substotal of Receipt Inc.  Aggregate Year-to-Date ▼  Substotal Other (specify) The Page (optional) Inc.	A.	,			Date of Receipt
City Casselton ID: SA11A1.25887    Casselton   ND   S8012		Mailing Address 122 13th Ave. N.			
Casselton   ND   58012   Amount of Each Receipt this Period		City	State	Zin Code	
FEC ID number of contributing federal political committee.  Name of Employer MCR ManorCare Inc.  Receipt For:		-		•	
Name of Employer   Clinical Services ConsultantRN					
Receipt For:			C		
Receipt For:		Name of Employer	Occupation	1	Payroll deduction
Primary   General Other (specify) ▼		HCR ManorCare Inc.			
Cither (specify) ▼    228.86			Aggregate	Year-to-Date ▼	
Full Name (Last, First, Middle Initial)  B. Karen L Davidson  Mailing Address 612 W. Magnolia  City Pana   Cher (specify) ▼   Cher (specify) This Page (optional)				228.86	
B. Karen L Davidson  Mailing Address 612 W. Magnolia  City Pana IL 62557  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Primary General Other (specify) ▼		Other (specify)			
Mailing Address 612 W. Magnolia  City Pana IL 62557  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Primary General Other (specify) ▼ Cocupation Administrator Aggregate Year-to-Date ▼ C	_	Full Name (Last, First, Middle Initial)			
City State Zip Code IL 62557  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care Inc.  Primary General Other (specify) ▼  City State Zip Code Primary General Other (specify) ▼  City State Zip Code PA 17111  Date of Receipt This Period  Dir Clinical Services  Aggregate Year-to-Date ▼  Transaction ID: SA11A1.25888  Amount of Each Receipt this Period  Biweely payroll deduction  Siweely payroll deduction  Biweely payroll deduction  Siweely payroll deduction  Date of Receipt  Mailing Address 541 S 61st Street  City State Zip Code PA 17111  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Name of Employer HCR ManorCare Inc.  Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Substotal Administrator  Receipt For: Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)	В.	-			<u> </u>
City State Zip Code IL 62557  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Receipt For: Primary General Other (specify) ▼ C State Zip Code Harrisburg PA 17111  FEC ID number of contributing federal political committee.  C July State Zip Code PA 17111  FEC ID number of contributing federal political committee.  Name of Employer Aggregate Year-to-Date ▼ Date of Receipt III Mailing Address 541 S 61st Street  City State Zip Code PA 17111  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Name of Employer HCR ManorCare Inc.  Receipt For: Primary General Other (specify) ▼ 335.00  SUBTOTAL of Receipts This Page (optional)		Mailing Address 612 W. Magnolia			
Pana IL 62557  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Receipt For: Primary General Other (specify) ▼  C. Daniel W Deitzel III  Mailing Address 541 S 61st Street  City State Zip Code PA 17111  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Name of Employer Administrator  Receipt For: Primary General Other (specify) ▼  335.00  Administrator  Aggregate Year-to-Date ▼  SUBTOTAL of Receipts This Page (optional)		City	State	Zip Code	
Name of Employer HCR ManorCare Inc.   Dir^ Clinical Services		Pana	IL	62557	
Name of Employer HCR ManorCare Inc.  Receipt For:  Primary General Other (specify) ▼  C. Daniel W Deitzel III  Mailing Address 541 S 61st Street  City Harrisburg PEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Receipt For:  Aggregate Year-to-Date ▼  Date of Receipt  Mailing Address 541 S 61st Street  City Harrisburg PA 17111  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Substock For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Substock For:  Aggregate Year-to-Date ▼					150.00
Total of Employer HCR Manor Care Inc.    Receipt For:		federal political committee.			
Receipt For:    Primary   General		Name of Employer	Occupation	1	Biweely payroll deduction - \$25
Primary General Other (specify) ▼    Primary Other (specify) ▼   Other (specify) ▼   Other (specify) ▼   Other (specify) ▼   Date of Receipt   Mailing Address 541 S 61st Street   Mailing Address 541 S 61st Street   Other (specify) ▼   Occupation			_		
C. Daniel W Deitzel III  Mailing Address 541 S 61st Street  City Harrisburg PA 17111  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Receipt For: Primary Other (specify) ▼  Culty State Zip Code PA 17111  Amount of Each Receipt this Period  Culty Administrator  Aggregate Year-to-Date ▼  Subtotal of Receipts This Page (optional)  Aggregate Year-to-Date ▼  Subtotal of Receipts This Page (optional)			Aggregate	Year-to-Date ▼	
C. Full Name (Last, First, Middle Initial)  Date of Receipt  Mailing Address 541 S 61st Street  City State Zip Code Harrisburg PA 17111  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Receipt For: Primary General Other (specify) ▼  Substort Adgregate Year-to-Date ▼  Substort Adgregate This Page (optional)  Substort Adgregate This Page (optional)  Date of Receipt  Transaction ID: SA11A1.25890  Amount of Each Receipt this Period  Biweely payroll deduction  Biweely payroll deduction  335.00		— · · · · · · · · · · · · · · · · · · ·		265.32	
C. Daniel W Deitzel III  Mailing Address 541 S 61st Street  City State Zip Code Harrisburg PA 17111  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Receipt For: Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)  Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		(4)	0 0	0 0 0 0 0 0 0	-
Mailing Address 541 S 61st Street  City State Zip Code Harrisburg PA 17111  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Receipt For: Aggregate Year-to-Date ▼  SUBTOTAL of Receipts This Page (optional)  Addining Address 541 S 61st Street  State Zip Code Transaction ID: SA11A1.25890  Amount of Each Receipt this Period  Transaction ID: SA11A1.25890  Amount of Each Receipt this Period  Siweely payroll deduction  ### 335.00  ### 335.00  ### 3372.34	_				Data of Descipt
City Harrisburg PA 17111  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Receipt For: Primary Other (specify) ▼  Aggregate Year-to-Date ▼  SUBTOTAL of Receipts This Page (optional)  State Zip Code Transaction ID: SA11A1.25890  Amount of Each Receipt this Period  Transaction ID: SA11A1.25890  Amount of Each Receipt this Period  Biweely payroll deduction -\$25  335.00	U.				<u> </u>
Harrisburg PA 17111  FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Receipt For:  Primary General Other (specify) ▼  Amount of Each Receipt this Period  155.00  Biweely payroll deduction - \$25   Biweely payroll deduction - \$25   SUBTOTAL of Receipts This Page (optional)		741 3 615t Street			
FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.  Receipt For: Primary General Other (specify)  Other (specify)  SUBTOTAL of Receipts This Page (optional)  155.00  Biweely payroll deduction - \$25  Biweely payroll deduction - \$25  335.00		•		Zip Code	Transaction ID: SA11A1.25890
Name of Employer HCR Manor Care Inc.   Administrator		Harrisburg	PA	17111	Amount of Each Receipt this Period
Name of Employer HCR ManorCare Inc.  Receipt For: Primary Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)  Occupation Administrator  Aggregate Year-to-Date ▼  335.00  Biweely payroll deduction - \$25  Aggregate Year-to-Date ▼  335.00			С		155.00
HCR ManorCare Inc.  Receipt For:		rederal political committee.			- Riwooly payroll deduction
Receipt For: Primary Other (specify)  SUBTOTAL of Receipts This Page (optional)  Aggregate Year-to-Date  335.00		Name of Employer HCR ManorCare Inc.			- \$25
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Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)			Aggregate		1
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SOBTOTAL of Receipts This Page (optional)	_				372.34
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 15 / 61
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Ar or	y information copied from such Reports and Statemen for commercial purposes, other than using the name a	its may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full) HCR Manor Care PAC			
Α.	Full Name (Last, First, Middle Initial) Frank D Demarinis			Date of Receipt
	Mailing Address 101 Suburban Drive			07 01 2006
	City Sta		Zip Code	Transaction ID: SA11A1.25799
	Elkton MI  FEC ID number of contributing federal political committee.  C		21921	Amount of Each Receipt this Period  9.62
	HCR ManorCare Inc	upation ninist		Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	regate	e Year-to-Date ▼ 325.06	
В.				Date of Receipt
	Mailing Address 3270 N Piqua Troy Rd			07 01 2006
	City Sta		Zip Code	Transaction ID: SA11A1.25896
	Troy Or	<u>H</u>	45373	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			20.00
	HCR ManorCare Inc	upatio ninist		Payroll deduction
	·		e Year-to-Date ▼	
	Primary General Other (specify) ▼	0	260.00	
<u>с.</u>	Full Name (Last, First, Middle Initial) Janet E Diehl			Date of Receipt
	Mailing Address 3903 BARBARA ANN DRIVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta MONROEVILLE PA		Zip Code 15146	Transaction ID: SA11A1.25897  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer HCR Manager of Inc.			10110	106.20
		upatio gional	n Dir of Ops	Weekly payroll deduction - \$9.62
			e Year-to-Date ▼ 356.20	
s	UBTOTAL of Receipts This Page (optional)			135.82
Н	OTAL This Period (last page this line number only)			

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 16 / 61			
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11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12			
				13 14 15 16 17			
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements may name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
$\setminus$	NAME OF COMMITTEE (In Full)						
$\rangle$	HCR Manor Care PAC						
Α.	Full Name (Last, First, Middle Initial) Timothy C Dietzen			Date of Receipt			
	Mailing Address 3615 Sunnyview Rd			09 13 2006			
	City	State	Zip Code	Transaction ID: SA11A1.25898			
	Appleton	WI	54914	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		150.00			
	Name of Employer HCR ManorCare Inc.	Occupation Administr		Biweekly payroll deduction - \$25			
	Receipt For:		Year-to-Date ▼				
	Primary General	199.19		7			
	Other (specify) ▼	0 0	390.00				
В.	Full Name (Last, First, Middle Initial) Jeannette Dunn			Date of Receipt			
	Mailing Address 916 Stargazer Road			08 09 YYYY 2006			
	City	State	Zip Code	Transaction ID: SA11A1.25904			
	Coatsville	PA	19320	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		61.52			
	Name of Employer	Occupation	า	Payroll deduction			
	HCR Manor Care, Inc.	Risk Man	ager Consultant				
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General Other (specify) ▼		246.08				
<u></u>	Full Name (Last, First, Middle Initial) Ms Nancy Edwards			Date of Receipt			
٠.	Mailing Address 5726 Rolbesay Drive			M M / D D / Y Y Y Y			
	-		7' 0 1	09 20 2006			
	City	State OH	Zip Code	Transaction ID: SA11A1.25906			
	Dublin	Оп	43017	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.			692.28			
HCR.ManorCare, Inc.  Receipt For:  Aggree		Occupation General I	n Manager, Central Division	Biweekly payroll deduction - \$115.38			
		Aggregate	e Year-to-Date ▼				
Primary General			692.28	1			
	Other (specify)			1			
s	UBTOTAL of Receipts This Page (optional)			903.80			
H	, 3 (1)		<u> </u>				
т	OTAL This Period (last page this line number of	only)					

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 17 / 61				
ITEMIZED RECEIPTS		or each category of the		(check only one)				
••	EMIZED RECEIL TO		Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   17				
Δr	ny information copied from such Reports and Si	atements may	y not he sold or used by any ners					
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.				
$\setminus$	NAME OF COMMITTEE (In Full)							
$ \rangle$	HCR Manor Care PAC							
$\mathbb{Z}$	Full Name (Last First Middle Initial)							
A.	Full Name (Last, First, Middle Initial) R Michael Ferguson			Date of Receipt				
	Mailing Address 2450 Underhill Rd			M M / D D / Y Y Y Y				
				09 20 2006				
	City	State	Zip Code	Transaction ID: SA11A1.25914				
	Toledo	OH	43615	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		230.76				
				Biweekly payroll deduction				
	Name of Employer HCR ManorCare Inc.	Occupation		- \$38.46				
	Receipt For:		of Purchasing Year-to-Date ▼	_				
	Primary General	Aggregate	Teal to Date V	7				
	Other (specify) ▼		634.59					
_				-				
R	Full Name (Last, First, Middle Initial) Annette L Foght			Date of Receipt				
ъ.	Mailing Address 510 Arrowhead Drive			M M / D D / Y Y Y Y				
	Maining Address 510 Allowhead Diffe			09 20 2006				
	City	State	Zip Code	Transaction ID: SA11A1.25915				
	Perrysburg	OH	43551	Amount of Each Receipt this Period				
	FEC ID number of contributing	С		180.00				
	federal political committee.			Division of the state of				
	Name of Employer HCR ManorCare Inc.	Occupation		Biweely payroll deduction - \$30				
			National Recruiting					
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼					
	Other (specify)		390.00					
				-				
_	Full Name (Last, First, Middle Initial)			Patro (Parada)				
C.	Sally A Gates  Mailing Address 2011 20Th Ln			Date of Receipt				
	Mailing Address 2011 2011 Ln			09 20 2006				
	City	State	Zip Code	Transaction ID: SA11A1.25921				
	Palm Beach Gardens	FL	33418	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.			240.00				
HCR ManorCare Inc.  Regio  Receipt For:  Aggree		Occupation		Biweely payroll deduction - \$40				
			Director of Operation					
		Aggregate	Year-to-Date ▼	_				
Primary General Other (specify) ▼			555.00					
			0 0 0 0 0 0 0	-				
s	UBTOTAL of Receipts This Page (optional)	650.76						
T	OTAL This Period (last page this line number of	only)						

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 18/61			
	EMIZED RECEIPTS		or each category of the	(check only one)			
•••	LIMIZED RECEIF 13		Detailed Summary Page	X 11a 11b 11c 12			
•	· · · · · · · · · · · · · · · · · · ·	-1		13 14 15 16 17			
or	ly information copied from such Reports and St for commercial purposes, other than using the	atements may name and add	r not be sold or used by any pers Iress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.			
$\setminus$	NAME OF COMMITTEE (In Full)						
	HCR Manor Care PAC						
A.	Full Name (Last, First, Middle Initial) Larry Robert Godla			Date of Receipt			
	Mailing Address 1556 Mary Ellen Court			07 26 7 2006			
	City	State	Zip Code	Transaction ID: SA11A1.25924			
	Mclean	VA	22101	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		173.13			
	Name of Employer HCR ManorCare Inc.	Occupation VP Deve	lop/Construction	Payroll deduction			
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General		865.41	7			
	Other (specify) ▼	0 0	803.41				
В.	Full Name (Last, First, Middle Initial) Bradley J Granger			Date of Receipt			
	Mailing Address 246 Dogwood Dr.			08 23 7 2006			
	City	State	Zip Code	Transaction ID: SA11A1.25801			
	Delaware	OH	43015	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		150.00			
	Name of Employer HCR ManorCare Inc.	Occupation Regional	n Director of Operation	Payroll deduction			
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		700.00				
_	Full Name (Last, First, Middle Initial)						
C.	Pamela Grant			Date of Receipt			
	Mailing Address 403 Hartless Rd			08 09 2006			
	City	State	Zip Code	Transaction ID: SA11A1.25929			
	Amherst	VA	24521	Amount of Each Receipt this Period			
Name of Employer HCR ManorCare Inc.  Receipt For:		С		160.00			
		Occupation Sr Admin		Payroll deduction			
		Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		640.00	]			
s	UBTOTAL of Receipts This Page (optional)			483.13			
$\vdash$	ago (optional)						
T	OTAL This Period (last page this line number of	only)					

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 19 / 61				
ITEMIZED RECEIPTS			or each category of the	(check only one)				
••			Detailed Summary Page	X   11a   11b   11c   12   15   16   17				
Δη	y information copied from such Reports and St	atements may	ynot he sold or used by any ners					
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.				
$\setminus$	NAME OF COMMITTEE (In Full)							
$ \rangle$	HCR Manor Care PAC							
	Full Names (Lost First Middle Initial)							
A.	Full Name (Last, First, Middle Initial) Ruth G Graziano			Date of Receipt				
	Mailing Address 503 Elk Mills Road			M M / D D / Y Y Y Y				
				09 20 2006				
	City	State	Zip Code	Transaction ID: SA11A1.25931				
	Oxford	PA	19363	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		323.10				
				Biweely payroll deduction				
	Name of Employer HCR ManorCare Inc.	Occupation		Biweely payroll deduction - \$53.85				
	Receipt For:		Director of Operation e Year-to-Date ▼					
	Primary General	Aggregate		7				
	Other (specify) ▼		673.10					
В.	Full Name (Last, First, Middle Initial) Jeffrey Grillo			Date of Receipt				
ъ.	Mailing Address 20566 Courier Ridge P	lace		M M / D D / Y Y Y Y				
		iacc		09 20 2006				
	City	State	Zip Code	Transaction ID: SA11A1.25934				
	Ashburn	VA	20147	Amount of Each Receipt this Period				
	FEC ID number of contributing	C		480.00				
	federal political committee.			Diversity of the destine				
	Name of Employer HCR ManorCare Inc.	Occupation		Biweely payroll deduction - \$80				
		VP^ Ope						
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-				
	Other (specify)		1172.36					
				-				
_	Full Name (Last, First, Middle Initial)			Patro (Parri )				
C.	Tara L Guggenbiller  Mailing Address 5818 Genoa Farms Bly			Date of Receipt				
	Walling Address 5818 Genoa Farms Biv	d.		07 01 2006				
	City	State	Zip Code	Transaction ID: SA11A1.25937				
	Westerville	OH	43082	Amount of Each Receipt this Period				
	FEC ID number of contributing	C		20.00				
	federal political committee.  Name of Employer HCR ManorCare Inc.							
			n	Payroll deduction				
Receipt For: Aggr		Administ						
		Aggregate	e Year-to-Date ▼	_				
Primary General Other (specify) ▼			260.00					
				-				
Г								
s	UBTOTAL of Receipts This Page (optional)	823.10						
T	OTAL This Period (last page this line number of	only)						

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 20 / 61
ITEMIZED RECEIPTS		or each category of the	(check only one)	
•••	LIMIZED REGEN 13		Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   17
Ar	ny information copied from such Reports and Statemen	nts may	not be sold or used by any perso	
or	for commercial purposes, other than using the name a	and add	lress of any political committee to	solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
$ \rangle$	HCR Manor Care PAC			
$\angle$				1
Α.	Full Name (Last, First, Middle Initial) Stephen L Guillard			Date of Receipt
٠	Mailing Address 217 Garden St.			M M / D D / Y Y Y Y
	Zir darden et.			07 01 2006
	City	ate	Zip Code	Transaction ID: SA11A1.25938
	Needham MA	<u> </u>	02492	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee			153.85
	federal political committee.			100.00
	Name of Employer HCR ManorCare Inc.	upation	1	Payroll deduction
	HCR ManorCare Inc.	cutive	Vice President	
	Receipt For: Agg	gregate	Year-to-Date ▼	
	Primary General		2000.05	
	Other (specify) ▼		2000.03	
	Full Name (Last, First, Middle Initial)			
В.	, , ,			Date of Receipt
	Mailing Address 9496South Dunbar Circle			M M / D D / Y Y Y Y
				09 20 2006
	•	ate	Zip Code	Transaction ID: SA11A1.25944
	South Jordan U	Τ	84095	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee	Ι.		120.00
	federal political committee.			
	Name of Employer HCR Manor Care, Inc.	upation	1	Biweekly payroll deduction - \$20
			Director - Western Division	5
		gregate	Year-to-Date ▼	
	Primary General  Other (specify) ▼		389.26	
	Other (specify)		0 0 0 0 0 0 0	
_	Full Name (Last, First, Middle Initial)			
C.	Kevin C Henricks			Date of Receipt
	Mailing Address 23 Chicago St. Apt.G			09 20 2006
	City Sta	ate	Zip Code	
	Plainfield IL	aic	60544	Transaction ID: SA11A1.25946  Amount of Each Receipt this Period
	EEC ID number of contributing		000+1	
	FEC ID number of contributing federal political committee.	١.		234.00
Name of Employer  ICP Maper Care Inc.  Occupation				Biweely payroll deduction
			- \$39	
Regional			Director of Operation  Year-to-Date ▼	-
	Primary General	Jiegale	Todi to Bato ¥	
	Other (specify)		514.00	
	·			507.05
s	UBTOTAL of Receipts This Page (optional)		·····	507.85
Г				
T	OTAL This Period (last page this line number only)		<b>&gt;</b>	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 21 / 61	
	EMIZED RECEIPTS		or each category of the	(check only one)	
••	LIMIZED REGEN 10		Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   1	17
Ar	ny information copied from such Reports and Statem	nents may	not be sold or used by any perso		
or	for commercial purposes, other than using the name	e and add	dress of any political committee to	solicit contributions from such committee.	
$\setminus$	NAME OF COMMITTEE (In Full)				
$ \rangle$	HCR Manor Care PAC				
	Full Name (Lost First Middle Initial)				
A.	Full Name (Last, First, Middle Initial) Maureen Hines			Date of Receipt	
	Mailing Address 640 Weatherstone Rd			M M / D D / Y Y Y Y	
				07 26 2006	
	•	State	Zip Code	Transaction ID: SA11A1.25951	
	Holland	OH	43528	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		60.00	
	Name of Employer O	ccupation	n	Biweekly payroll deduction - \$20	
	HCR ManorCare Inc.	ir Nursi	ng Leadership Develop	Ψ20	
		Aggregate	e Year-to-Date ▼		
	Primary General	-	300.00	1	
	Other (specify) ▼				
— В.	Full Name (Last, First, Middle Initial) Timothy M Hock			Date of Receipt	_
	Mailing Address 8054 Tillicum Grove North			M M / D D / Y Y Y Y	
				09 20 2006	
	•	State	Zip Code	Transaction ID: SA11A1.25952	
	Rockford	MI	49341	Amount of Each Receipt this Period	
	FEC ID number of contributing	C		115.38	ı
	federal political committee.			Diversity is a well also divertices	4
	HCR ManorCare Inc	ccupation		Biweely payroll deduction - \$19.23	
			Director of Ops		
	Receipt For:  Primary General	Aggregate	e Year-to-Date ▼	,	
	Other (specify)		255.38		
_	Full Name (Last, First, Middle Initial)				
C.	Sharon Hollins			Date of Receipt	
	Mailing Address 3311 Gallatin Road			09 21 2006	
	City	State	Zip Code	Transaction ID: SA11A1.25697	
	-	ОН	43606	Amount of Each Receipt this Period	
	FEC ID number of contributing		1 1 1 1 1	600.00	1
	federal political committee.	C		600.00	
Name of Employer HCR Manor Care, Inc. Asst Gen		 n	Contribution - Credit Card		
		eral Counsel - Legal			
<b>_</b>			e Year-to-Date ▼		
	Primary General	-	600.00	1	
	Other (specify)	1 1	000.00		
г			_		
١	UBTOTAL of Receipts This Page (optional)			775.38	
$\vdash$	ODI OTAL OF HOSSIPES THIS LAYE (OPTIONAL)				ī
Т	OTAL This Period (last page this line number only)				

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 22 / 61								
ıт	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(0	(check only one)							
TI LIMIZED RECEIF 13			Detailed Summary Page	.	_	1a	11b	Н	11c	12		٦.,
Ar	ny information copied from such Reports and Sta	tements may	y not be sold or used by any pe	erson fo	or the p	ourpos	14 e of so	liciti	15 ng con	tribution	ns	17
or		ame and add	aress of any political committee	e to soil	licit cor	ıtributio	ons tro	m s	Jen co	mmittee	э. ——	
$ \rangle$	NAME OF COMMITTEE (In Full) HCR Manor Care PAC											
<u></u>	Full Name (Last, First, Middle Initial)											
A.	Lynn M Hood				Date	e of Re	eceipt					
	Mailing Address 15415 Meadow Wood D	r			м О	9 /		0	/ Y	200		
	City	State	Zip Code		Tran	sactio	n ID:	SA	11A1.	25957	,	
	Wellington	FL	33414		Amo	ount of	Each	Rec	eipt thi	is Perio	d	
	FEC ID number of contributing federal political committee.	C								360	.00	
	Name of Employer HCR ManorCare Inc.	Occupatio Asst Ger			Biwe - \$60	ely pa	ayroll	ded	luction	า		
	Receipt For:		e Year-to-Date ▼									
	Primary General	, iggi ogait	Tour to Buto V									
	Other (specify) ▼	0 0	629.26									
В.	Full Name (Last, First, Middle Initial) Jeffrey R House				Date	e of Re	eceipt					
	Mailing Address 11699 Bennington Rd				м О	7 <sup>M</sup>		D 1	/ Y	200	) 6	
	City	State	Zip Code		Tran	sactio	n ID:	SA	11A1.	25958	,	
	Durand	MI	48429		Amo	ount of	Each	Rec	eipt thi	is Perio	d	
	FEC ID number of contributing federal political committee.	C								10	.00	
	Name of Employer HCR ManorCare Inc.	Occupatio General			Payr	oll de	ductio	n				
	Receipt For:	Aggregate	e Year-to-Date ▼									
	Primary General Other (specify) ▼	0 0	260.00	0								
_	Full Name (Last, First, Middle Initial)				D -:	( 5						
C.	Mr. John Huber  Mailing Address 26448 Carronade Drive					e of Re	eceipt	D	/ Y	YY	V	1
	Z0440 Gallonade Blive				0			0	Ĺ	200		
	City	State	Zip Code		Tran	sactio	n ID:	SA	11A1.	25960	1	
	Perrysburg	OH	43551		Amo	ount of	Each	Rec	eipt thi	is Perio	d	
	FEC ID number of contributing federal political committee.	C			180.00							
	Name of Employer HCR.ManorCare, Inc.	Occupatio Regional	n Director of Operations		Biwe - \$30	ekly p	ayrol	l de	ductio	on		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 360.00									
s	UBTOTAL of Receipts This Page (optional)			<u> </u>						550.	00	ì
	· • · · · · · · · · · · · · · · · · · ·			-								

TOTAL This Period (last page this line number only) ......

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 23 / 61				
ITEMIZED RECEIPTS			or each category of the	(check only one)				
••			Detailed Summary Page	X   11a   11b   11c   12   15   16   17				
Δη	y information copied from such Reports and St	atements may	y not he sold or used by any ners					
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.				
$\setminus$	NAME OF COMMITTEE (In Full)							
$ \rangle$	HCR Manor Care PAC							
	Full Name (Last, First, Middle Initial)							
A.	Rebecca J Hullinger			Date of Receipt				
	Mailing Address 1250 Horseshoe Cir #1	05		09 20 Y Y Y Y Y				
	City	State	Zip Code	Transaction ID: SA11A1.25962				
	Ann Arbor	MI	48108	Amount of Each Receipt this Period				
	FEC ID number of contributing							
	federal political committee.	C		240.00				
	Name of Employer HCR ManorCare Inc.	Occupation	1	Biweely payroll deduction - \$40				
	HCR ManorCare Inc.		rog Implem Consult					
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General Other (specify) ▼		520.00					
	Other (specify)	0 0	0 0 0 0 0 0 0					
_	Full Name (Last, First, Middle Initial)			B. (B. )				
В.	Frank A Jannazo  Mailing Address 3466 Country Farms R	and		Date of Receipt				
	Maining Address 5400 Country Fairins In	uau		09 20 2006				
	City	State	Zip Code	Transaction ID: SA11A1.25965				
	Oregon	OH	43616	Amount of Each Receipt this Period				
	FEC ID number of contributing	C		210.00				
	federal political committee.	0						
	Name of Employer	Occupation	ı	Biweely payroll deduction - \$30				
	HCR ManorCare Inc.		ounts Receivable					
	Receipt For:  Primary  General	Aggregate	Year-to-Date ▼					
	Primary General Other (specify) ▼		385.00					
		0 0	0 0 0 0 0 0 0	-				
C.	Full Name (Last, First, Middle Initial) Ms Diane Johnson			Date of Receipt				
	Mailing Address 206 Ruth Road			M M / D D / Y Y Y Y				
	-			09 20 2006				
	City	State	Zip Code	Transaction ID: SA11A1.25968				
	Fleetwood	PA	19522	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		346.14				
	Name of Employer			Biweely payroll deduction - \$57.69				
			n Director of Operations	- \$57.69				
Regio			Year-to-Date <b>V</b>	$\dashv$				
Primary General Other (specify) ▼				7				
			750.03					
s	UBTOTAL of Receipts This Page (optional)	796.14						
			_					
T	OTAL This Period (last page this line number of	oniy)						

SCHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS	Detailed Summary Page	X   11a   11b   11c   12   17   18   17   18   17   18   17   18   17   18   17   18   18
Ar or	ny information copied from such Reports and Statements r for commercial purposes, other than using the name and	nay not be sold or used by any perso address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) HCR Manor Care PAC		
Α.	Full Name (Last, First, Middle Initial) Mr. David Lanning		Date of Receipt
	Mailing Address 806 Copley Lane		07 26 YYYYY 2006
	City State Silver Spring MD	Zip Code 20904	Transaction ID: SA11A1.25986
	FEC ID number of contributing federal political committee.	20904	Amount of Each Receipt this Period  150.00
		resident, Development	Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	ate Year-to-Date ▼ 750.00	
В.	Full Name (Last, First, Middle Initial) Terry L Lawrence Nelson Mailing Address 1880 Oldfield Dr.		Date of Receipt
	City State	Zip Code	0 8 2 3 2 0 0 6  Transaction ID: SA11A1.25987
	Huntingtown MD	20639	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		100.00
	Name of Employer HCR ManorCare Inc. Occupa	tion I Services ConsultantRN	Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	ate Year-to-Date ▼ 340.00	
<u> </u>	Full Name (Last, First, Middle Initial) Barry A Lazarus		Date of Receipt
	Mailing Address 2629 Liverpool Ct		09 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Toledo OH	Zip Code 43617	Transaction ID: SA11A1.25988  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		450.00
	Name of Employer HCR ManorCare Inc.  Occupa VP^ Ro	tion eimbursement	Biweely payroll deduction - \$75
		ate Year-to-Date ▼ 800.00	
s	UBTOTAL of Receipts This Page (optional)		700.00
$\vdash$	OTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 25 / 61			
ITEMIZED RECEIPTS		or each category of the		(check only one)			
••	EMIZED RECEIL TO		Detailed Summary Page	X 11a 11b 11c 12			
Δr	ny information copied from such Reports and St	atomonte may	anot he cold or used by any nore	13 14 15 16 17			
or	for commercial purposes, other than using the	name and add	lress of any political committee to	osolicit contributions from such committee.			
$\setminus$	NAME OF COMMITTEE (In Full)						
$\rangle$	HCR Manor Care PAC						
Α.	Full Name (Last, First, Middle Initial) Larry C Lester			Date of Receipt			
	Mailing Address 13507 Westbrook			09 20 2006			
	City	State	Zip Code	Transaction ID: SA11A1.25990			
	Plymouth	MI	48170	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		461.52			
	Name of Employer HCR ManorCare Inc.	Occupation General N	n Mgr^ VP Marketing	Biweekly payroll deduction - \$76.92			
	Receipt For:		Year-to-Date ▼				
	Primary General	00 0		7			
	Other (specify) ▼	0 0	1308.52				
В.	Full Name (Last, First, Middle Initial) Ms Elizabeth Loyet			Date of Receipt			
	Mailing Address 20115 183rd Place Nor	theast		09 13 2006			
	City	State	Zip Code	Transaction ID: SA11A1.25993			
	Woodinville	WA	98072	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		60.00			
	Name of Employer HCR Manor Care Inc.	Occupation Administr		Biweely payroll deduction - \$10			
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼	0 0	370.00				
<u> </u>	Full Name (Last, First, Middle Initial) Carrie Lund			Date of Receipt			
	Mailing Address 14802 Dunston Place			0 9 2 0 2 0 0 6			
	City	State	Zip Code	Transaction ID: SA11A1.25996			
	Tampa	<u>FL</u>	33618	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.			230.76			
Name of Employer HCR Manor Care, Inc. Receipt For:		Occupation Sr. Admir	n nistrator - Palm Harbor	Biweekly payroll deduction - \$38.46			
		Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		491.87				
s	UBTOTAL of Receipts This Page (optional)			752.28			
H	OTAL This Period (last page this line number of						

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 26 / 61			
	•	Use separate schedule(s) or each category of the		(check only one)			
ITEMIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 12			
				13 14 15 16 17			
Ar	ny information copied from such Reports and S	tatements may	not be sold or used by any pers	on for the purpose of soliciting contributions			
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
$ \rangle$	HCR Manor Care PAC						
$\angle$				1			
Α.	Full Name (Last, First, Middle Initial)			Date of Receipt			
Α.	Jacqueline M Macenas  Mailing Address 1074 Amber Ct			<u> </u>			
	Mailing Address 1074 Amper Ct			07 26 2006			
	City	State	Zip Code	Transaction ID: SA11A1.25997			
	West Chicago	IL	60185	Amount of Each Receipt this Period			
	FEC ID number of contributing						
	federal political committee.	C		60.00			
				Biweekly payroll deduction			
	Name of Employer HCR ManorCare Inc.	Occupation		- \$20			
			Marketing Manager				
	Receipt For:	Aggregate	Year-to-Date ▼	_			
	Primary General Other (specify) ▼		300.00				
	Cirici (Specify)	0 0		4			
	Full Name (Last, First, Middle Initial)						
В.				Date of Receipt			
	Mailing Address 700 Golden Drive			M M / D D / Y Y Y Y			
				09 20 2006			
	City	State	Zip Code	Transaction ID: SA11A1.26001			
	Blandon	PA	19510	Amount of Each Receipt this Period			
	FEC ID number of contributing	С		180.00			
	federal political committee.	C		100.00			
	Name of Employer	Occupation	<u> </u>	Biweekly payroll deduction			
	HCR Manor Care, Inc		rator - Sinking Spring	- \$30			
	Receipt For:		Year-to-Date ▼				
	Primary General	30 0		7			
	Other (specify) ▼		400.00				
_	Full Name (Last, First, Middle Initial)			Data of Basel is			
C.	Deborah A McMonagle			Date of Receipt			
	Mailing Address 1632 Patricia Ave			09 21 2006			
	City	State	Zip Code	Transaction ID: SA11A1.26008			
	Willow Grove	PA	19090	Amount of Each Receipt this Period			
	FEC ID number of contributing						
	federal political committee.	C		260.00			
				Weekly payroll deduction -			
	Name of Employer HCR ManorCare Inc.	Occupation		\$20			
		General I		_			
	Receipt For:		Year-to-Date ▼	_			
	Primary General		300.00				
	Other (specify)	-		<b>-</b>			
_	UDTOTAL of Descipts This Descripts 1			500.00			
∟ <sup>s</sup>	UBTOTAL of Receipts This Page (optional)						
1							

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 27 / 61		
	EMIZED RECEIPTS		or each category of the	(check only one)		
			Detailed Summary Page	X   11a   11b   11c   12   15   16   17		
Δr	y information copied from such Reports and St	atemente may	y not be sold or used by any nors			
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.		
$\setminus$	NAME OF COMMITTEE (In Full)					
$ \rangle$	HCR Manor Care PAC					
<u>/</u>	Full Name (Last, First, Middle Initial)					
A.	Ms Patricia Megary			Date of Receipt		
	Mailing Address 3114 Hayfield Drive			0 8 2 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: SA11A1.25677		
	Ellicott City	MD	21042	Amount of Each Receipt this Period		
	FEC ID number of contributing					
	federal political committee.	C		250.00		
	Name of Employer HCR.ManorCare, Inc.	Occupation	1	Contribution		
		Administr				
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General Other (specify) ▼		250.00			
	and (openly) •			-		
В.	Full Name (Last, First, Middle Initial) Kirsten Mentzell			Date of Receipt		
ъ.	Mailing Address 421 Ben Oaks Drive W	est		M M / D D / Y Y Y Y		
			07 01 2006			
	City	State	Zip Code	Transaction ID: SA11A1.26010		
	Severna Park	MD	21146	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee			20.00		
	federal political committee.			Payroll deduction		
	Name of Employer HCR Manor Care, Inc.	Occupation		Fayron deduction		
			Rehab Manager Year-to-Date ▼	_		
	Receipt For:  Primary  General	Aggregate	r rear-to-Date ▼	7		
	Other (specify)		260.00			
				_		
C.	Full Name (Last, First, Middle Initial) Murry J Mercier			Date of Receipt		
٠.	Mailing Address 7110 Oak Bluff Lane			M M / D D / Y Y Y Y		
				09 20 2006		
	City	State	Zip Code	Transaction ID: SA11A1.26011		
	Maumee	OH	43537	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		700.00		
				Biweekly payroll deduction		
	Name of Employer HCR ManorCare Inc.	Occupation VP Dir of	n Information Serv	- \$100		
			Year-to-Date V	$\dashv$		
	Primary General			7		
	Other (specify) ▼	0 0	1900.00	1		
s	UBTOTAL of Receipts This Page (optional)			970.00		
			·			
T	TOTAL This Period (last page this line number only)					

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 28 / 61
ITEMIZED RECEIPTS			or each category of the	(check only one)
			Detailed Summary Page	X   11a   11b   11c   12   15   16   17
An	y information copied from such Reports and St			
or	for commercial purposes, other than using the	o solicit contributions from such committee.		
$\setminus$	NAME OF COMMITTEE (In Full)			
	HCR Manor Care PAC			
Α.	Full Name (Last, First, Middle Initial)  A. Michelle M Meyer			Date of Receipt
	Mailing Address 28 W. Linwood Rd.			09 20 2006
	City	State	Zip Code	Transaction ID: SA11A1.26012
	Linwood	MI	48634	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		95.00
	Name of Employer HCR ManorCare Inc.	Occupation	1	Biweekly payroll deduction - \$16
	HCR ManorCare Inc.	Administr	rator	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		260.00	
	Cirior (specify)	0 0		4
В.	Full Name (Last, First, Middle Initial) Brian K Mikolajczyk			Date of Receipt
	Mailing Address 1793 Bucklew			08 09 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.26014
	Toledo	ОН	43613	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		57.71
	Name of Employer	Occupation	1	Payroll deduction
	HCR ManorCare Inc.		raining Specialist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		288.47	
	Other (Specify)	0 0		-
C.	Full Name (Last, First, Middle Initial) Debra I Miles			Date of Receipt
	Mailing Address 17738 W. River Rd.			09 20 2006
	City	State	Zip Code	Transaction ID: SA11A1.26015
	Bowling Green	OH	43402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.  Name of Employer HCR ManorCare Inc.			115.38
			Accounting	Biweekly payroll deduction - \$19.23
			Year-to-Date ▼	
			220.38	7
		220.30	1	
s	UBTOTAL of Receipts This Page (optional)			268.09
H	, 3 (1 7			
T	OTAL This Period (last page this line number of			

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 29 / 61
	EMIZED RECEIPTS		or each category of the	(check only one)
TI EIMIZED TIEGEN 10			Detailed Summary Page	X   11a   11b   11c   12
Any information copied from such Reports and Stateme				13 14 15 16 17
or	for commercial purposes, other than using the	name and add	dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
	HCR Manor Care PAC			
A.	Full Name (Last, First, Middle Initial) Samuel B Miller			Date of Receipt
	Mailing Address 107 York Street			09 06 2006
	City	State	Zip Code	Transaction ID: SA11A1.25804
	St. Louis	MI	48880	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		45.00
	Name of Employer HCR ManorCare Inc.	Occupation Administr		Payroll deduction
	Receipt For:		e Year-to-Date ▼	
	Primary General		205.00	7
	Other (specify) ▼		285.00	
В.	Full Name (Last, First, Middle Initial) Scott Miller			Date of Receipt
	Mailing Address 198 Old Mill Drive	09 20 2006		
	City	State	Zip Code	Transaction ID: SA11A1.26016
	Langhorne	PA	19047	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		230.76
	Name of Employer HCR ManorCare Inc.		n iistrator	Biweekly payroll deduction - \$38.46
Receipt For:				
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 284.65	
	Primary General	Aggregate		Date of Receipt
 C.	Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	Aggregate		Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
 C.	Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Doug Mock	Aggregate		M M / D D / Y Y Y Y
	Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Doug Mock Mailing Address 308 East Front Street	0 0	284.65	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
 C.	Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Doug Mock Mailing Address 308 East Front Street  City	State	284.65 Zip Code	Transaction ID: SA11A1.25674  Amount of Each Receipt this Period  250.00
C.	Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Doug Mock Mailing Address 308 East Front Street  City Perrysburg  FEC ID number of contributing	State OH C	Zip Code 43551	Transaction ID: SA11A1.25674  Amount of Each Receipt this Period
C.	Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Doug Mock Mailing Address 308 East Front Street  City Perrysburg  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care, Inc.  Receipt For:	State OH C Occupation Regional	Zip Code 43551	Transaction ID: SA11A1.25674  Amount of Each Receipt this Period  250.00
C.	Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Doug Mock Mailing Address 308 East Front Street  City Perrysburg  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care, Inc.	State OH C Occupation Regional	Zip Code 43551	Transaction ID: SA11A1.25674  Amount of Each Receipt this Period  250.00
	Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Doug Mock Mailing Address 308 East Front Street  City Perrysburg  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care, Inc.  Receipt For: Primary General Other (specify) ▼	State OH C Occupation Regional Aggregate	Zip Code 43551  Director of Ops Year-to-Date  1250.00	Transaction ID: SA11A1.25674  Amount of Each Receipt this Period  250.00  Contribution
	Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Doug Mock Mailing Address 308 East Front Street  City Perrysburg  FEC ID number of contributing federal political committee.  Name of Employer HCR Manor Care, Inc.  Receipt For: Primary General	State OH C Occupation Regional Aggregate	Zip Code 43551  Director of Ops Year-to-Date  1250.00	Transaction ID: SA11A1.25674  Amount of Each Receipt this Period  250.00

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 30 / 61
ITEMIZED RECEIPTS			or each category of the	(check only one)
			Detailed Summary Page	X   11a   11b   11c   12   15   16   17
Δn	y information copied from such Reports and St	atements may	y not he sold or used by any ners	
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
$ \rangle$	HCR Manor Care PAC			
<u>/</u>	Full Name (Last, First, Middle Initial)			
A.	Ms Susan Morey			Date of Receipt
	Mailing Address 700 Hunters Road			09 / 20 / Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.26020
	Mohnton	PA	19540	Amount of Each Receipt this Period
	FEC ID number of contributing		1 1 1 1 1	
	federal political committee.	C		300.00
	Name of Employer HCR.ManorCare, Inc.	Occupation	 1	Biweely payroll deduction - \$50
	HCR.ManorCare, Inc.	Regional	Director of Operations	- 400
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		750.00	7
	Other (specify)	0 0		
	Full Name (Last, First, Middle Initial)			
В.	Ms Joylin Nation			Date of Receipt
	Mailing Address 15985 Voyageurs Place	9		09 20 2006
	City	State	Zip Code	Transaction ID: SA11A1.26028
	West Palm Beach	FL	33414	Amount of Each Receipt this Period
	FEC ID number of contributing	C		173.10
	federal political committee.			
	Name of Employer	Occupation	ı	Biweekly payroll deduction - \$28.85
	HCR Manor Care, Inc.		dministrator	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_
	Other (specify)	' '	374.95	
	(4)	0 0	0 0 0 0 0 0 0	-
_	Full Name (Last, First, Middle Initial)			Data of Boosint
C.	David K Nees  Mailing Address 5315 Rymoor Drive			Date of Receipt
				09 20 2006
	City	State	Zip Code	Transaction ID: SA11A1.26029
	Sylvania	OH	43560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		126.90
				- Riweely payroll deduction
				Biweely payroll deduction - \$21.15
			e General Counsel e Year-to-Date ▼	$\dashv$
				7
Other (specify) ▼			275.05	
_				
	UPTOTAL of December This David (anticart)	600.00		
-	UBTOTAL of Receipts This Page (optional)			
T	OTAL This Period (last page this line number of			

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 31 / 61
	EMIZED RECEIPTS		or each category of the	(check only one)
TI EIMIZED TIEGEII TO			Detailed Summary Page	X 11a 11b 11c 12
Δ	winformation and them and Oto			13 14 15 16 17
or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may lame and add	rnot be sold or used by any pers Iress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$  \rangle$	HCR Manor Care PAC			
$\mathbb{Z}$				
Α.	Full Name (Last, First, Middle Initial) Linda Neumann			Date of Receipt
Α.	Mailing Address 28 Roslyn Road			M M / D D / Y Y Y Y
	Zo Hosiyii Hodu			09 20 2006
	City	State	Zip Code	Transaction ID: SA11A1.26031
	Grosse Pointe Shor	MI	48236	Amount of Each Receipt this Period
	FEC ID number of contributing	C		230.76
	federal political committee.			
	Name of Employer HCR ManorCare Inc.	Occupation	1	Biweekly payroll deduction - \$38.46
	HCR ManorCare Inc.	Regional	Director of Operation	φου. 10
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		576.94	
	Other (specify)	0 0		_
	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 2505 Waterford Court			M M / D D / Y Y Y
	011		7' 0 1	09 20 2006
	City	State	Zip Code	Transaction ID: SA11A1.26034
	Palmetto	FL	34221	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
				Biweely payroll deduction
	Name of Employer HCR ManorCare Inc.	Occupation		- \$50
	Receipt For:	<u> </u>	Director of Operation  Year-to-Date ▼	_
	Primary General	Aggregate	rear-to-Date ▼	
	Other (specify)		950.00	
				_
_	Full Name (Last, First, Middle Initial)			Patrick Parallel
C.	Ms Leslie Ohm  Mailing Address 12331 South 71st Avenu			Date of Receipt
	Walling Address 12331 South 71st Avenu	ue		09 20 2006
	City	State	Zip Code	Transaction ID: SA11A1.26036
	Palos Heights	IL	60463	Amount of Each Receipt this Period
	FEC ID number of contributing	С		300.00
	federal political committee.	<u> </u>		000.00
	Name of Employer HCR.ManorCare, Inc.	Occupation	1	Biweekly payroll deduction - \$50
HCR.ManorCare, Inc.		Regional	Director of Operations	<b>400</b>
	Receipt For: Primary General		Year-to-Date ▼	
			650.00	
	Other (specify)		000.00	_
Г				
s	UBTOTAL of Receipts This Page (optional)		1	880.76
$\vdash$				
				· ·

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 32 / 61   (check only one)
Ar	ny information copied from such Reports and Statements ma for commercial purposes, other than using the name and ac	ay not be sold or used by any persideress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) HCR Manor Care PAC	7,	
Α.	Full Name (Last, First, Middle Initial) Ms. Annette Orlowski		Date of Receipt
	Mailing Address 669 Highway 60	09 20 2006	
	City State	Zip Code	Transaction ID: SA11A1.26037
	Cedarburg WI  FEC ID number of contributing federal political committee.  C	53012	Amount of Each Receipt this Period  346.14
		on , Clinical Services	Biweekly payroll deduction - \$57.69
	Receipt For:  Primary  General  Other (specify) ▼	te Year-to-Date ▼ 669.29	
В.	Full Name (Last, First, Middle Initial) Mr. James Pagoaga Mailing Address 13129 Fox Path Lane		Date of Receipt
		09 20 2006	
	City State West Friendship MD	Zip Code 21794	Transaction ID: SA11A1.26041  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		269.24
	Name of Employer HCR.ManorCare, Inc.  Occupation Vice Pre	on esident, Rehabilitation	Biweekly payroll deduction - \$38.46
		te Year-to-Date ▼ 730.88	
<u> </u>	Full Name (Last, First, Middle Initial) Mr. David Parker		Date of Receipt
	Mailing Address 2154 Tremont Road		09 / 20 / Y Y Y Y Y Y Y Y
	City State Columbus OH	Zip Code	Transaction ID: SA11A1.26044
	FEC ID number of contributing federal political committee.	43212	Amount of Each Receipt this Period  348.00
	Name of Employer HCR.ManorCare, Inc.  Occupation VP Assi	on stant General Manager	Biweekly payroll deduction - \$58
	Receipt For:  Primary  General  Other (specify)	te Year-to-Date ▼ 738.25	
s	UBTOTAL of Receipts This Page (optional)		963.38
Т	OTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 33 / 61
ITEMIZED RECEIPTS			or each category of the	(check only one)
••			Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   17
Δη	y information copied from such Reports and St	atements may	y not he sold or used by any ners	
or	for commercial purposes, other than using the	o solicit contributions from such committee.		
$\setminus$	NAME OF COMMITTEE (In Full)			
$ \rangle$	HCR Manor Care PAC			
<u></u>	Full Name (Last, First, Middle Initial)			
A.				Date of Receipt
	Mailing Address 812 Countay Club Drive	е		M M / D D / Y Y Y Y
	City	Ctoto	7in Cada	09 13 2006
	City Butler	State MO	Zip Code 64730	Transaction ID: SA11A1.26045
			04730	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer	Occupation		Biweekly payroll deduction
	Name of Employer HCR ManorCare Inc.	Administi		- \$20
	Receipt For:		e Year-to-Date ▼	
	Primary General		380.00	7
	Other (specify) ▼	0 0	300.00	<b>」</b>
	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 8124 Windmill Ct.			M M / D D / Y Y Y
	Cit.	01-1-	7in Oada	08 22 2006
	City Severn	State MD	Zip Code 21144-2312	Transaction ID: SA11A1.25675
		IVID	21144-2312	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Francisco	10		Contribution
	Name of Employer HCR ManorCare Inc.	Occupation Administr	rator - Dulaney Towson	
	Receipt For:	_	Year-to-Date ▼	
	Primary General	35 0	050.00	7
	Other (specify)		250.00	
_	Full Name (Lost First Middle Initial)			
C.	Full Name (Last, First, Middle Initial) Pamela Petsopoulos			Date of Receipt
	Mailing Address 9046 Merrimoor Blvd			M M / D D / Y Y Y Y
	City	State	Zip Code	07 01 2006
	Largo	FL	33777	Transaction ID: SA11A1.25805  Amount of Each Receipt this Period
	FEC ID number of contributing		30777	
	Federal political committee.  Name of Employer HCR ManorCare Inc.  Receipt For: Primary General			20.00
			า	Payroll deduction
			Rehab Mgr.	
			Year-to-Date ▼	
			260.00	7
	Other (specify) ▼	0 0	200.00	1
Г				
s	UBTOTAL of Receipts This Page (optional)			390.00
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T	OTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 34 / 61
ITEMIZED RECEIPTS			or each category of the	(check only one)
			Detailed Summary Page	X   11a   11b   11c   12   15   16   17
Δr	y information copied from such Reports and St	atemente may	not be sold or used by any pers	
or	for commercial purposes, other than using the	name and add	lress of any political committee to	o solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
$\rangle$	HCR Manor Care PAC			
Α.	Full Name (Last, First, Middle Initial) Karen K Phelps			Date of Receipt
	Mailing Address Rt. 4 <sup>^</sup> Box 87p			09 20 2006
	City	State	Zip Code	Transaction ID: SA11A1.26050
	Tecumseh	OK	74873	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		189.00
	Name of Employer HCR ManorCare Inc.	Occupation	r Of Nursing Serv	Biweekly payroll deduction - \$27
	Receipt For:		Year-to-Date ▼	
	Primary General			7
	Other (specify) ▼		513.00	
В.	Full Name (Last, First, Middle Initial) David III Pipkin			Date of Receipt
	Mailing Address 9211 Marydell Rd	09 / 20 / 4 9 9		
	City	State	Zip Code	Transaction ID: SA11A1.26054
	Ellicott City	MD	21042	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		68.47
	Name of Employer HCR ManorCare Inc.	Occupation	Director of Operation	Biweekly payroll deduction - \$30
	Receipt For:		Year-to-Date ▼	
	Primary General	7.99.094.0		7
	Other (specify) ▼	0 0	530.11	
C.	Full Name (Last, First, Middle Initial) Clifton J Porter II			Date of Receipt
	Mailing Address 3929 Azalea Circle			09 20 YYYYY 2006
	City	State	Zip Code	Transaction ID: SA11A1.26055
	Maumee	OH	43537	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		407.89
Name of Employer HCR ManorCare Inc.		Occupation AVP^ Go	vernment Relations	Biweekly payroll deduction - \$58.27
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼		973.09	
	IIPTOTAL of December This Daws (anti)			665.36
S	UBTOTAL of Receipts This Page (optional)			
<sub>T</sub>	OTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 35 / 61
	EMIZED RECEIPTS		or each category of the	(check only one)
TI EIMIEED TIEGEII TO			Detailed Summary Page	X 11a 11b 11c 12
Δη	y information copied from such Reports and St.	atomonte may	not be cold or used by any pers	13 14 15 16 17
or	for commercial purposes, other than using the	name and add	ress of any political committee to	or for the purpose of soliciting contributions of solicit contributions from such committee.
abla	NAME OF COMMITTEE (In Full)			
$\rangle$	HCR Manor Care PAC			
Α.	Full Name (Last, First, Middle Initial) Michael J Reed			Date of Receipt
	Mailing Address 3899 Midshore Drive			09 / 20 / 4 2006
	City	State	Zip Code	Transaction ID: SA11A1.26058
	Naples	<u>FL</u>	34109	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		491.52
	Name of Employer HCR Manor Care, Inc.	Occupation VP Assist	ted Living Operations	Biweekly payroll deduction - \$81.92
	Receipt For:		Year-to-Date ▼	
	Primary General	1 1	401.52	7
	Other (specify)	0 0	491.52	
В.	Full Name (Last, First, Middle Initial) John I Remenar			Date of Receipt
	Mailing Address 2723 Rexton Ridge Rd	09 / 20 / 4 9 9		
	City	State	Zip Code	Transaction ID: SA11A1.26062
	Toledo	OH	43617	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		300.00
	Name of Employer HCR ManorCare Inc.	Occupation VP Finan	n cial Services	Biweekly payroll deduction - \$50
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		573.00	
<u> </u>	Full Name (Last, First, Middle Initial) Glen Roebuck			Date of Receipt
	Mailing Address 314 Forest Road			0 9 2 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.26068
	Davenport	IA	52803	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		140.00
	Name of Employer HCR ManorCare Inc.	Occupation Regional	n Director of Operation	Biweekly payroll deduction - \$20
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	420.00	7
	Other (specify)	0 0	TZ0.00	_
s	UBTOTAL of Receipts This Page (optional)			931.52
T (	OTAL This Period (last page this line number of	only)		

9	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 36 / 61
	,	Use separate schedule(s) or each category of the		(check only one)
ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12	
				13 14 15 16 17
Ar or	ly information copied from such Reports and Stator commercial purposes, other than using the n	atements may name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
$\rangle$	HCR Manor Care PAC			
Α.	Full Name (Last, First, Middle Initial) <b>A.</b> David R Roth			Date of Receipt
	Mailing Address 5257 Bentwood Drive	09 20 2006		
	City	State	Zip Code	Transaction ID: SA11A1.26071
	Mason	OH	45040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		128.58
	Name of Employer HCR ManorCare Inc.		Of Planning	Biweekly payroll deduction - \$21.43
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	1
	Other (specify) ▼	0 0	274.18	
В.	Full Name (Last, First, Middle Initial) Lori Saidleman-Yoh			Date of Receipt
	Mailing Address 5421 Willow Run Drive	07 26 2006		
	City	State	Zip Code	Transaction ID: SA11A1.26077
	Milford	OH	45150	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		57.69
	Name of Employer HCR ManorCare Inc.	Occupation Executive		Biweekly payroll deduction - \$19.23
	Receipt For:	1	Year-to-Date ▼	
	Primary General	00 0		1
	Other (specify) ▼		288.45	
<u> </u>	Full Name (Last, First, Middle Initial) Francis J Schmitt			Date of Receipt
	Mailing Address 4007 Thistle Hill Court			09 20 2006
	City	State	Zip Code	Transaction ID: SA11A1.26080
	Sugar Land	TX	77479	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		480.00
	Name of Employer HCR ManorCare Inc.	Occupation VP^ Ope		Biweekly payroll deduction - \$80
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1040.00	
s	UBTOTAL of Receipts This Page (optional)			666.27
$\vdash$	,			_

TOTAL This Period (last page this line number only) .....

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 37 / 61
	EMIZED RECEIPTS		or each category of the	(check only one)
••			Detailed Summary Page	X   11a   11b   11c   12   15   16   17
Ar	y information copied from such Reports and Sta	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the i	name and add	ress of any political committee to	solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
	HCR Manor Care PAC			
Α.	Full Name (Last, First, Middle Initial) Bruce G Schroeder			Date of Receipt
	Mailing Address 10945 Lakeview Dr			M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O
	City	State	Zip Code	Transaction ID: SA11A1.26081
	Whitehouse	OH	43571	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		146.93
	Name of Employer HCR ManorCare Inc.	Occupation		Biweekly payroll deduction - \$20
	Receipt For:	AVP Hom	e Heaith Year-to-Date ▼	
	Primary General	Aggregate	Teal-to-Date V	1
	Other (specify) ▼	1	470.09	
_				
В.	Full Name (Last, First, Middle Initial) Mr. Mark Schroepfer			Date of Receipt
	Mailing Address 2328 Bonnie Brae			M M / D D / Y Y Y Y
	City	State	Zip Code	09 13 2006
	City Santa Ana	CA	92706	Transaction ID: SA11A1.26082  Amount of Each Receipt this Period
			32100	
	FEC ID number of contributing federal political committee.	C		90.00
	Name of Employer	Occupation		Biweekly payroll deduction
	HCR.ManorCare, Inc.	Administr		- \$15
	Receipt For:		Year-to-Date ▼	
	Primary General	00 0		1
	Other (specify) ▼	0 0	210.00	
_	Full Name (Last, First, Middle Initial)			
C.	Ms Elizabeth Schupp			Date of Receipt
	Mailing Address 1022 Oakview Drive			09 08 2006
	City	State	Zip Code	Transaction ID: SA11A1.25683
	Highland Heights	OH	44143	Amount of Each Receipt this Period
	FEC ID number of contributing	С		400.00
	federal political committee.	0		
	Name of Employer HCR.ManorCare, Inc.	Occupation		Contribution
		Administr		_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	,
	Other (specify)		400.00	
				636.93
S	UBTOTAL of Receipts This Page (optional)		<b>)</b>	030.93
	OTAL This Period (last page this line number of	inly)		
1 "		···· <b>y</b> / ·······	······································	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 38 / 61
	EMIZED RECEIPTS		or each category of the	(check only one)
•••	LIMIZED RECEIP 13		Detailed Summary Page	X   11a   11b   11c   12
_				13 14 15 16 17
or	y information copied from such Reports and St for commercial purposes, other than using the	atements may name and add	r not be sold or used by any pers Iress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
	HCR Manor Care PAC			
A.				Date of Receipt
	Mailing Address 7645 Yawberg Road			09 21 2006
	City	State	Zip Code	Transaction ID: SA11A1.25696
	Whitehouse	OH	43571	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer HCR Manor Care, Inc.	Occupation Senior Ma	anager - Tax	Contribution - Credit Card
	Receipt For:		Year-to-Date ▼	
	Primary General		210.00	7
	Other (specify)	0 0	210.00	
В.	Full Name (Last, First, Middle Initial) Joyce Louise Smith			Date of Receipt
	Mailing Address 3521 Cedar Creek Cou	rt		09 20 2006
	City	State	Zip Code	Transaction ID: SA11A1.26087
	Maumee	OH	43537	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		461.52
	Name of Employer HCR ManorCare Inc.	Occupation VP^ Clinic	n cal Services	Biweekly payroll deduction - \$76.92
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1112.52	]
<u> </u>	Full Name (Last, First, Middle Initial) Steven D Spencer			Date of Receipt
	Mailing Address 1102 Towsley Lane			09 20 YYYY 2006
	City	State	Zip Code	Transaction ID: SA11A1.26090
	Ann Arbor	MI	48105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		296.17
	Name of Employer HCR ManorCare Inc.	Occupation VP Huma	n an Resources	Biweekly payroll deduction - \$42.31
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	296.17	]
s	UBTOTAL of Receipts This Page (optional)			857.69
T	OTAL This Period (last page this line number of	only)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 39 / 61
	EMIZED RECEIPTS		or each category of the	(check only one)
••			Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   17
Δη	y information copied from such Reports and St	atements may	y not he sold or used by any ners	
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
$ \rangle$	HCR Manor Care PAC			
	Full Name (Last, First, Middle Initial)			
A.	Helen Taube			Date of Receipt
	Mailing Address 200 Parkwood Drive So	outh		M M / D D / Y Y Y Y
	-			09 20 2006
	City	State	Zip Code	Transaction ID: SA11A1.26101
	Royal Palm Beach	FL	33411	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		105.00
				Biweekly payroll deduction
	Name of Employer HCR Manor Care, Inc.	Occupation		- \$15
	Receipt For:		Clinical Services Year-to-Date ▼	_
	Primary General	Aggregate		7
	Other (specify) ▼		285.00	
В.	Full Name (Last, First, Middle Initial) Ms Abby Taylor			Date of Receipt
ъ.	Mailing Address 2756 Medford			M M / D D / Y Y Y Y
	Z730 Wedioid			08 22 2006
	City	State	Zip Code	Transaction ID: SA11A1.25676
	Toledo	OH	43614	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.			Operation in the second
	Name of Employer HCR Manor Care, Inc.	Occupation		Contribution
		_	Perrysburg Commons	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		250.00	
				-
_	Full Name (Last, First, Middle Initial)			5. (5. )
C.	Rami Ubaydi Mailing Address 27134 Pumpkin Street			Date of Receipt
	Mailing Address 27134 Pumpkin Street			09 20 2006
	City	State	Zip Code	Transaction ID: SA11A1.26107
	Murrieta	CA	92562	Amount of Each Receipt this Period
	FEC ID number of contributing	C		231.00
	federal political committee.	0		
	Name of Employer HCR Manor Care, Inc.	Occupation	า	Biweekly payroll deduction - \$38.50
		_ · _ · _ ·	Director of Operations	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		476.00	
		0 0	0 0 0 0 0 0 0	-
s	UBTOTAL of Receipts This Page (optional)			586.00
T	OTAL This Period (last page this line number of	only)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 40 / 61
	EMIZED RECEIPTS		or each category of the	(check only one)
••			Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   17
Δr	y information copied from such Reports and St	atemente may	y not be sold or used by any ners	
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
$\rangle$	HCR Manor Care PAC			
Α.	Full Name (Last, First, Middle Initial) Mr. Douglas Wanke			Date of Receipt
	Mailing Address 13908 Pondview Road			09 20 7 2006
	City	State	Zip Code	Transaction ID: SA11A1.26115
	Silver Spring	MD	20905	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		160.00
	Name of Employer HCR.ManorCare, Inc.	Occupation Director of	n of Health Planning	Biweekly payroll deduction - \$20
	Receipt For:		Year-to-Date ▼	
	Primary General			7
	Other (specify) ▼		640.00	
В.	Full Name (Last, First, Middle Initial) M Keith Weikel			Date of Receipt
	Mailing Address Three River Hills Ln			09 20 2006
	City	State	Zip Code	Transaction ID: SA11A1.26117
	Toledo	OH	43623	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1153.86
	Name of Employer HCR ManorCare Inc.	Occupation Sr Execu	n tive VP and COO	Biweekly payroll deduction - \$192.31
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		2499.97	
— С.	Full Name (Last, First, Middle Initial) Tammy Whorton			Date of Receipt
J.	Mailing Address 22965 Martinique			M M / D D / Y Y Y Y
	<u> </u>			09 20 2006
	City	State	Zip Code	Transaction ID: SA11A1.26120
	Edmond	OK	73003	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		140.00
	Name of Employer HCR Manor Care, Inc.	Occupation Senior M	n CS - Clinical Services	Biweekly payroll deduction - \$20
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		220.00	
٩	UBTOTAL of Receipts This Page (optional)			1453.86
$\vdash$	ODI OTAL OF HOOGIPES THIS Fage (Optional)			
	OTAL This Period (last page this line number of	only)		

S	CHEDULE A (FEC Form 3X)		Harana and a dead date)	FOR LINE NUMBER: PAGE 41 / 61
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
•••	LIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
Δ.	winformation against from augh Departs and St	stomonto mo	, not be eald ar used by any nare	13 14 15 16 17
or	y information copied from such Reports and Sta for commercial purposes, other than using the r	name and add	dress of any political committee to	o solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
$ \rangle$	HCR Manor Care PAC			
$\angle$				
Α.	Full Name (Last, First, Middle Initial) Robert Wilcox			Date of Receipt
	Mailing Address 5208 Dry Wells Rd			M M / D D / Y Y Y Y
				07 26 2006
	City	State	Zip Code	Transaction ID: SA11A1.26121
	Austin	TX	78749	Amount of Each Receipt this Period
	FEC ID number of contributing	С		54.00
	federal political committee.			Di calla ca alla la di ca
	Name of Employer HCR ManorCare Inc.	Occupation		Biweekly payroll deduction - \$18
			Director of Operation	
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	-
	Other (specify)	' '	270.00	
		0 0	0 0 0 0 0 0 0	4
	Full Name (Last, First, Middle Initial)			
В.	Dan Wood			Date of Receipt
	Mailing Address 844 Miami Street			09 20 2006
	City	State	Zip Code	Transaction ID: SA11A1.26124
	Toledo	ОН	43605	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		360.00
	Name of Employer	Occupation	n	Biweekly payroll deduction
	HCR ManorCare Inc.	Asst Gen		- \$60
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	-	766.00	7
	Other (specify)		700.00	
_	Full Name (Last, First, Middle Initial)			
C.	Ms Sherriann Wood			Date of Receipt
	Mailing Address 5 Aberfield Lane			09 / DD / YYYY 20 2006
	City	State	Zip Code	
	Miamisburg	OH	45342	Transaction ID: SA11A1.26125  Amount of Each Receipt this Period
	FEC ID number of contributing		100 12	
	federal political committee.	C		230.76
	Nome of Employer	Occupation	2	Biweekly payroll deduction - \$38.46
	Name of Employer HCR.ManorCare, Inc.	1	entral Division Region 2	- \$38.46
	Receipt For:		e Year-to-Date ▼	1
	Primary General		500.70	1
	Other (specify)	0 0	580.76	
_				
	LIDTOTAL of Desciots This Description in			644.76
L	UBTOTAL of Receipts This Page (optional)			
т	OTAL This Period (last page this line number o	nly)		
1	, , , , , , , , , , , , , , , , , , , ,	• ,	•	

#### SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

NAME OF COMMITTEE (In Full) HCR Manor Care PAC

Full Name (Last, First, Middle Initial)

FEC ID number of contributing

federal political committee.

Other (specify)

FEC ID number of contributing

federal political committee.

Other (specify)

Name of Employer HCR.ManorCare, Inc.

Primary

Full Name (Last, First, Middle Initial)

Mailing Address 6970 St. Edwards Loop

Name of Employer HCR ManorCare Inc.

Primary

Receipt For:

B. Ms. Nancy Lee Zant

Fort Meyers

Receipt For:

City

Mailing Address 3845 Drummond Rd

General

General

Cynthia M Zalewski

City

Toledo

PAGE 42/61 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. Date of Receipt 09 20 2006 State Zip Code Transaction ID: SA11A1.26130 OH 43613 Amount of Each Receipt this Period 115.38 C Biweekly payroll deduction - \$19.23 Occupation Senior Attorney Aggregate Year-to-Date ▼ 250.01 Date of Receipt 26 2006 Transaction ID: SA11A1.25811 State Zip Code FL 33912 Amount of Each Receipt this Period C 165.00 Payroll deduction

SUBTOTAL of Receipts This Page (optional)	•	280.38
TOTAL This Period (last page this line number only)	<b>•</b>	22930.35

Occupation Administrator

Aggregate Year-to-Date ▼

825.00

S	CHEDULE A (FEC Form 3X)		Llac concrete cohodulo(a)	FOR LINE NUMBER: PAGE 43 / 61
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	(check only one)  11a 11b 11c 12  13 14 15 X 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
$\rangle$	NAME OF COMMITTEE (In Full) HCR Manor Care PAC			
۹.	Full Name (Last, First, Middle Initial) CONGRESSMAN JOE BARTON COMMITTEE, T	HE		Date of Receipt
	Mailing Address P.O. Box 1444			08 23 7 2006
	City	State	Zip Code	Transaction ID: SA16.25797
	Ennis	TX	75120	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<b>C</b> C00	0195065	5000.00
	Name of Employer	Occupation	n	Refund from Joe Barton Committee
	Receipt For: 2006 Primary X General Other (specify)	Aggregate	e Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	5000.00
TOTAL This Period (last page this line number only)	<b>•</b>	5000.00

	CHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 44 / 61 (check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	11a 11b 11c 12 13 14 15 16 X 17
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) HCR Manor Care PAC			
Α.	Full Name (Last, First, Middle Initial) The Huntington National Bank			Date of Receipt
	Mailing Address P.O. Box 5065			07 31 7 2006
	City Cleveland	State OH	Zip Code 44101-0065	Transaction ID: SA17.25666  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	44101-0003	70.44
	Name of Employer	Occupation	1	Interest Income 07/06
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 513.42	
В.	Full Name (Last, First, Middle Initial) The Huntington National Bank			Date of Receipt
	Mailing Address P.O. Box 5065			08 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA17.25667
	Cleveland	OH	44101-0065	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		52.96 Interest Income 08/06
	Name of Employer	Occupation	1	interest income 00/00
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		566.38	
С.	Full Name (Last, First, Middle Initial) The Huntington National Bank			Date of Receipt
	Mailing Address P.O. Box 5065			09 30 YYYYY 2006
	City	State	Zip Code	Transaction ID: SA17.25668
	Cleveland	OH	44101-0065	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		45.49 Interest Income 09/06
	Name of Employer	Occupation	1	interest income 09/00
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		611.87	
s	UBTOTAL of Receipts This Page (optional)			168.89
Т	OTAL This Period (last page this line number o	only)		168.89

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee  NAME OF COMMITTEE (In Full) HCR Manor Care PAC  Full Name (Last, First, Middle Initial) The Huntington National Bank  Mailing Address P.O. Box 5065  City State Zip Code Cleveland OH 44101-0065 Purpose of Disbursement Service Fees - 07/06 Candidate Name  Office Sought: House Senate Primary General Other (specify) Type  Office Sought: District:  Full Name (Last, First, Middle Initial)  Transaction ID: SB21B.25703  Amount of Each Disbursement this Period  Category/ Type  Transaction ID: SB21B.25704		CHEDULE B (FEC Form 3X)		erate schedule(s)			LINE I	NUMBE one)	R:			PAG	E 45/	61
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee    NAME or CoMMITTEE (in Full)	11	EMIZED DISBURSEMEN I S											_	26 30b
NAME OF COMMITTEE (in Full) HCR Manor Care PAC  Full Name (Last, First, Middle Initial) The Huntington National Bank Mailing Address P.O. Box 5065  City Cleveland OH 44101-0065 Purpose of Disbursement Service Fees - 0706 Candidate Name Office Sought: House President State: District:  Full Name (Last, First, Middle Initial) Transaction ID: SB21B.25703 Date of Disbursement Ib: Period  Amount of Each Disbursement Ib: Period  Transaction Ib: SB21B.25704 Date of Disbursement Ib: Period  Amount of Each Disbursement Ib: Period  Transaction Ib: SB21B.25704 Date of Disbursement Ib: Period  Amount of Each Disbursement Ib: Period  Transaction Ib: SB21B.25705 Date of Disbursement Ib: Period  Amount of Each Disbursement Ib: Period  Transaction Ib: SB21B.25705 Date of Dis														ns
Full Name (Last, First, Middle Initial) A. The Huntington National Bank  Mailing Address P.O. Box 5065  City State Zip Code OH 44101-0065  Purpose of Disbursement Service Fees - 07/06  Candidate Name  Office Sought: House President OH 44101-0065  Full Name (Last, First, Middle Initial) B. The Huntington National Bank  Mailing Address P.O. Box 5065  City State Zip Code OH 44101-0065  City General President  State: District:  Full Name (Last, First, Middle Initial) Cleveland OH 44101-0065  Purpose of Disbursement For: Senate President Service Fees - 08/06  Cardidate Name  Office Sought: House Senate OH 44101-0065  Purpose of Disbursement For: Senate President Service Fees - 08/06  Cardidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  Transaction ID: SB21B.25704  Date of Disbursement this Period  Amount of Each Disbursement this Period  Office Sought: House Senate President Other (specify) ▼  Transaction ID: SB21B.25705  Date of Disbursement ID: SB21B.25705  Date of Disbursement To: Senate President State: District:  Full Name (Last, First, Middle Initial)  Transaction ID: SB21B.25705  Date of Disbursement This Period  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  Transaction ID: SB21B.25705  Date of Disbursement This Period  Amount of Each Disbursement Initial State: District:  State: District: State: Disbursement For: Senate Primary General Primary Gener	$\vdash$			<u> </u>										
A The Huntington National Bank  Mailing Address P.O. Box 5065  City Cleveland OH 44101-0065  Purpose of Disbursement Service Fees - 07/06  Candidate Name  Office Sought: House Senate President District:  Full Name (Last, First, Middle Initial)  Transaction ID: SB21B.25704  Date of Disbursement Ib: Period  Category' Type  Office Sought: House Senate Primary General Primary Genera	$ \rangle$	HCR Manor Care PAC												
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Contribution Candidate Name		Category/								
Canadate Name		Type								
	ment For: 2006									
Senate President	Primary X General Other (specify) ▼									
State: NY District: 29										_
Full Name (Last, First, Middle Initial)  McCrery for Congress						SB23.2	2571 ·	1		
			М	M	isburse	nent 7	Y Y	Y .	Υ	
Mailing Address 1900 CNB Tower 333 Texas Street			0	7	0	7	2	0 Ó 6		
•	State Zip Code LA 71101		Am	ount c	f Each	Disburs	ement	this P	eriod	
Purpose of Disbursement Contribution		0 0					3	500.0	0	
Candidate Name	-	Category/ Type								
Senate X President	ment For: 2006 Primary General Other (specify)									
State: LA District: 04  Full Name (Last, First, Middle Initial)			_							_
McCrery for Congress			_		isburse				V	
Mailing Address 1900 CNB Tower 333 Texas Street			0		, o	7 /	2	0 Ó 6		
City Shreveport	State Zip Code LA 71101		Am	ount c	f Each	Disburs	ement	this P	eriod	
Purpose of Disbursement Contribution		0 0					5	0.000	0	
Candidate Name	١,	Category/ Type								
Office Sought:  X House Senate President State: LA District: 04	ment For: 2006 Primary X General Other (specify)									
-				•			•	000.0	0	_
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SCIEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	(check only	INE NUMBER: PAGE 52/					
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	23 28b	24 28c	25 29	26 30b	
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam							•	
NAME OF COMMITTEE (In Full) HCR Manor Care PAC	e and address of any political co	minitiee to soi	icit contribui	10115 110111	Such con	muee		
Full Name (Last, First, Middle Initial)  MELISSA BEAN FOR CONGRESS  Mailing Address POST OFFICE BOX 306	8		Transact Date of D	_		48 2 0 0 6	Y	
			A	( F l. D		-1.11-1- D		
City BARRINGTON	State Zip Code IL 60010		Amount	of Each Di	isburseme		•	
Purpose of Disbursement Contribution Candidate Name		Category/	L			1000.0	0	
Office Sought:    X   House   Disburse     Senate   President     State: IL   District: 08	ement For: 2006 Primary X General Other (specify)	Туре						
Full Name (Last, First, Middle Initial)  3. MIKE CRAPO FOR US SENATE			Date of D	isbursem	_			
Mailing Address PO BOX 1948			0 <sup>M</sup> 8 0	14	/ Y	ž 0 ŏ 6	Y	
City BOISE	State Zip Code ID 83701		Amount o	of Each Di	isburseme		-	
Purpose of Disbursement Contribution Candidate Name	[	O ata samul				3500.0	U	
Candidate Name	'	Category/ Type						
Office Sought:    House   Disburse     X   Senate     President     State: ID   District: 00	ement For: 2006 Primary X General Other (specify)							
Full Name (Last, First, Middle Initial)  MIKE SODREL FOR CONGRESS			Transact Date of D	isbursem	_	58		
Mailing Address 702 NORTH SHORE DR	IVE SUITE 500		0 9	07	/ Y	ž 0 ŏ 6	Y	
City JEFFERSONVILLE	State Zip Code IN 47130		Amount o	of Each Di	isburseme			
Purpose of Disbursement Contribution						750.0	0	
Candidate Name		Category/ Type						
Office Sought:  X House Senate President State: IN District: 9	ement For: 2006 Primary X General Other (specify)							
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>				5250.0	0	
TOTAL This Period (last page this line number only)								

SCIEDOLE B (I LCI OIIII 3X)	Use seperate schedule(s)	(check only	NUMBER:		PAGE	53 / 6	1
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	23 28b	24 28c	25 29	26 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full) HCR Manor Care PAC	e and address of any political co	orininitiee to so	icit contribut	10113 110111	Such com	THILLIGE .	
Full Name (Last, First, Middle Initial) A. PEOPLE WITH HART INC  Mailing Address P.O. Box 435				ion ID: SE isburseme		30 2 0 0 6	Y
City	State Zip Code		Amount o	f Each Dis	sbursemer	nt this Pe	eriod
Wexford Purpose of Disbursement Contribution	PA 15090					2500.0	0
Candidate Name		Category/ Type					
Office Sought: X House Disburse Senate President State: PA District: 04	ement For: 2006 Primary X General Other (specify)						
Full Name (Last, First, Middle Initial)  Republican Governor's Association			Transact Date of D	ion ID: SE		34	
Mailing Address 1747 Pennsylvania Aven	ue, NW		0 <sup>M</sup> 8 <sup>M</sup>	21	/ Y 2	0 0 6	Y
City Washington	State Zip Code DC 20006		Amount o	f Each Dis	sbursemer		
Purpose of Disbursement Contribution Candidate Name		Category/				1000.0	U
Office Sought:    House   Disburse     Senate     President     State: District:	ement For: 2006 Primary X General Other (specify)	Туре					
Full Name (Last, First, Middle Initial) SANTORUM 2006				ion ID: SE	323.2573 ent	36	
Mailing Address ONE TOWER BRIDGE S	SUITE 1440		8 0	<sup>D</sup> 21	/ Y 2	0 0 6	Y
City WEST CONSHOHOCKEN	State Zip Code PA 19428		Amount o	f Each Dis	sbursemer		-
Purpose of Disbursement Contribution			L			5000.0	0
Candidate Name  Office Sought: House Disburse	ement For: 2006	Category/ Type					
State: PA  Office Sought:  X Senate President State: PA  District: 00	Primary X General Other (specify)						
SUBTOTAL of Disbursements This Page (optional)		<u> </u>			8	500.0	0
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SCIEDOLE B (I LCI OIIII 3X)	Use seperate schedule(s)	(check on	v one)		PAGE	54 / 61	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	23 28b	24 28c	25 29	26 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full) HCR Manor Care PAC	e and address of any political co	ommittee to so	DICIT CONTINU	lions from s	Such Com	muee	
Full Name (Last, First, Middle Initial) Schwartz for Congress  Mailing Address 38 Ivy Street, S.E.				ion ID: SE hisburseme	ent	2	
City Washington	State Zip Code DC 20003		Amount o	of Each Dis	bursemen	t this Pe	eriod
Purpose of Disbursement Contribution Candidate Name		Category/			1	1000.00	) 
Office Sought:  X House Senate President State: PA District: 13	ment For: 2006 Primary X General Other (specify)	Туре					
Full Name (Last, First, Middle Initial)  3- SIMMONS FOR CONGRESS			Date of D	ion ID: SE	ent		
Mailing Address P.O. Box 268 Drawer 27 P.O. Box 268 Drawer 27			0 9	07	/ L ž	006	
City Stonington	State Zip Code CT 06378		Amount o	of Each Dis	bursemen	t this Pe	-
Purpose of Disbursement Contribution Candidate Name	[	Category/ Type				700.00	
Office Sought:  X House Senate President State: CT District: 2	ment For: 2006 Primary X General Other (specify)	Турс					
Full Name (Last, First, Middle Initial)  SPRATT FOR CONGRESS COMMITTEE			Date of D	ion ID: SE	ent		_
Mailing Address PO BOX 830			0 9	06	/ Y Ž	0 0 6	
City YORK	State Zip Code SC 29745		Amount o	of Each Dis	bursemen		-
Purpose of Disbursement Contribution	[		L			500.00	)
Candidate Name		Category/ Type					
Office Sought: X House Disburse Senate President State: SC District: 05	ment For: 2006 Primary X General Other (specify)						
SUBTOTAL of Disbursements This Page (optional)		<u> </u>			2	250.00	
TOTAL This Period (last page this line number only)							

SCILDOLL B (I LCI OIIII 5X)	Use seperate schedule(s)	(check only			PAGE	55/6	1
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	23 28b	24 28c	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full) HCR Manor Care PAC	e and address of any political co	ininitiee to so	icit contribu	IIONS ITON	I SUCIT COIT	imitee	
Full Name (Last, First, Middle Initial)  SWEENEY FOR CONGRESS INC			Transact Date of D		_	69 2 0 0 6	Y
Mailing Address Post Office Box 1465			0 3	0.7		2000	
City Clifton Park	State Zip Code NY 12065		Amount o	of Each D	isburseme		-
Purpose of Disbursement Contribution Candidate Name		Category/				500.0	0
	ement For: 2006 Primary X General Other (specify)	Type					
Full Name (Last, First, Middle Initial)  TEXAS FREEDOM FUND			Date of D	isbursem	_		
Mailing Address 104 East Hume Avenue			0 <sup>M</sup> 8 N	03	) / Y	ž 0 ŏ 6	Y
City Alexandria	State Zip Code VA 22301		Amount o	of Each D	isburseme		-
Purpose of Disbursement Contribution Candidate Name		Category/				5000.0	U .
Office Sought: House Disburse Senate President State: District:	ement For: 2006 Primary X General Other (specify)	Туре					
Full Name (Last, First, Middle Initial) WELDON VICTORY COMMITTEE			Transact Date of D	isbursem		73	
Mailing Address P. O. Box 1992			0 9	15	7 Y	ž 0 ŏ 6	Y
City Media	State Zip Code PA 19063		Amount o	of Each D	isburseme	nt this Pe	eriod
Purpose of Disbursement Contribution		•	L			2000.0	0
Candidate Name		Category/ Type					
Office Sought:  X House Senate President State: PA District: 7	ment For: 2006 Primary X General Other (specify)						
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Any Information copied from such Reports and Statem or for commercial purposes, other than using the name										<u> </u>
<ul> <li>NAME OF COMMITTEE (In Full)</li> </ul>	and address of any political co	111111	ilee io s	SOIICIT COLL	เกมนโ	וו פווטו	JIII SUUII	COITIII	IIIICC	
HCR Manor Care PAC										
Full Name (Last, First, Middle Initial)				Tran	sacti	ion ID:	SB29.2	2577	5	
Charlie Crist for Governor						isburse		V V	V	V
Mailing Address 10130 Northlake Blvd. Suite 214-311				0 8		1	5 /	2	0 ŏ 6	
City West Palm Beach	State Zip Code FL 33412			Amo	unt o	f Each	Disburs	ement	this P	eriod
Purpose of Disbursement			-						500.0	0
Contribution Candidate Name		0.1.								
		Cate Ty								
Office Sought: House Disburse	ment For:  Primary General									
President	Other (specify)									
State: District:										
Full Name (Last, First, Middle Initial)  3. Citizens for Gardner Committee						ion ID: isburse	SB29.2	2575	4	
Onizers for dardier committee				М	М			ү <u>ү</u>	. Y .	Υ
Mailing Address 431 N. Prospect St.				0.9		0	6 /	2	0 Ď 6	
City Bowling Green	State Zip Code OH 43402			Amo	unt o	f Each	Disburs	ement	this P	eriod
Purpose of Disbursement Contribution				1 L					500.0	0
Candidate Name		Cate Ty								
X Senate President	ment For: Primary General Other (specify)									
State: OH District: 2										
Full Name (Last, First, Middle Initial) Citizens for Mary Taylor				_		isburse		25778	3	
Mailing Address 3788 Park Ridge Drive				0 8	M	<sup></sup> 2	0 /	Ý Ž	0 Ď 6	Y
City Uniontown	State Zip Code OH 44685			Amo	unt o	f Each	Disburs	ement	this P	eriod
Purpose of Disbursement Contribution		•		] L				2	0.000	0
Candidate Name		Cate								
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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a		24 25 28c X 29	26 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam						ıs
NAME OF COMMITTEE (In Full) HCR Manor Care PAC	e and address of any political co	minitee to sc	onen contribu	tions from su	ch committee	
Full Name (Last, First, Middle Initial)  Citizens for Wagoner  Mailing Address 7445 Airport Highway				tion ID: SB2 Disbursement		5 Y
City	State Zip Code		Amount	of Each Disbu	ursement this	Period
Holland Purpose of Disbursement	OH 43528	0 0			250.	00
Contribution Candidate Name		Category/ Type				
Office Sought:  Senate  President  State:  Disburse	ement For: Primary General Other (specify)					
Full Name (Last, First, Middle Initial)  3. Citizens for Wagoner			Date of D	tion ID: SB2 Disbursement		
Mailing Address 7445 Airport Highway			0 8	21	<sup>Y</sup> <sup>Y</sup> 2 0 0 6	3 <sup>Y</sup>
City Holland	State Zip Code OH 43528		Amount	of Each Disbu	ursement this	-
Purpose of Disbursement Contribution Candidate Name		Category/			400.	00
	ement For:	Type				
Senate President State: District:	Primary General Other (specify) ▼					
Full Name (Last, First, Middle Initial) Committee to Elect Bill Harris				tion ID: SB2 Disbursement		
Mailing Address 1238 Township Road 15	06		0 9	07	žoŏe	6 <sup>Y</sup>
City Ashland	State Zip Code OH 44805		Amount	of Each Disbu	rsement this	
Purpose of Disbursement Contribution			L		2000.	00
Candidate Name		Category/ Type				
Office Sought:    House   Disburse     X Senate     President     State: OH   District: 19	ement For: Primary General Other (specify)					
SUBTOTAL of Disbursements This Page (optional)		<b>•</b>			2650.	00
TOTAL This Period (last page this line number only)						

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Ιſ	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	$\prod_{i=1}^{n}$	22 28a	_	23 28b	24 28c	X	25 29	П	26 30b
	Information copied from such Reports and Staten											S	
	or commercial purposes, other than using the nam	e and address of any politic	ai com	millee to	SOIICI	t Contri	DULIO	ns iro	in Such	COIIII	muee		
	HCR Manor Care PAC												
	Full Name (Last, First, Middle Initial)					Trans	actio	n ID:	SB29.2	2575	6		
۱.	Committee to Elect David Goodman					Date o	of Dist			Y Y	Y	Υ	
	Mailing Address 2736 Bexley Park Road					0 9		0	7 /	2	0 Ď 6		
	City Bexley	State Zip Code OH 43209				Amoui	nt of E	Each	Disburs	emen	t this F	erio	1
	Purpose of Disbursement	40200								. 1	500.0	00	
	Contribution												
	Candidate Name			itegory/ Type									
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	Senate   President	Primary General  Other (specify)											
	State: District:	(-p <b>/</b> /											
•	Full Name (Last, First, Middle Initial)					Trans	actio	n ID:	SB29.2	2572	8		
3.	Committee to Re-Elect Husted					Date o	_			V • V		V	
	Mailing Address 77 South High Street 14th Floor					0 <sup>M</sup> 8	<b>M</b> /	0	3 /	ž	0 Ď 6	Y	
	City Columbus	State Zip Code OH 43215				Amoui	nt of E	Each	Disburs	emen	t this F	erio	1
	Purpose of Disbursement Contribution									2	2500.0	00	
	Candidate Name			tegory/ Γype									
	Senate President	ement For: Primary General Other (specify)											
	State: District:												
).	Full Name (Last, First, Middle Initial) Friends of Dwight Evans					Date o	f Dist	burse	SB29.2 ment			V	
	Mailing Address P.O. Box 19097					0 9	М /	<sup>D</sup> 2	9 ′	Ż	0 Ď 6		
	City Philadelphia	State Zip Code PA 19138				Amoui	nt of E	Each	Disburs	emen			1
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	Senate President	ement For: Primary General Other (specify)	•										
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TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	$\stackrel{\frown}{\Box}$ 2	2 8a	23 28b	24 280	;	25 29	П	26 30b
Any Information copied from such Reports and Sta										3	
or for commercial purposes, other than using the n	ame and address of any political co	ommitt	ee to s	SOIICIT	contrib	utions ti	om sucn	comr	nittee		
NAME OF COMMITTEE (In Full) HCR Manor Care PAC											
Full Name (Last, First, Middle Initial)				Т	ransa	ction ID	: SB29.	2579	3		
Friends of John Perzel Committee				D	ate of	Disburs		V . V	· · ·	V	
Mailing Address P.O. Box 386					0 9 "	]	29 /	2	0 Ď 6		
City Conshohocken	State Zip Code PA 19428			Α	mount	t of Each	n Disburs	emen	t this F	erio	ī
Purpose of Disbursement	177 10120	U	-	1				1	000.0	00	
Contribution											
Candidate Name		Catego Typo									
	rsement For:										
Senate President	Primary General Other (specify) ▼										
State: District:	Carron (openally)										
Full Name (Last, First, Middle Initial)				Т	ransa	ction ID	: SB29.	2579	4		
House Democratic Campaign Committe	e			_		Disburs				v	
Mailing Address P.O. Box 555					0 9	/ D	29 /	ž	0 Ď 6	Y	
City Harrisburg	State Zip Code PA 17108			A	mount	of Each	n Disburs	emen	t this F	erio	<u> </u>
Purpose of Disbursement Contribution		0		1 L					500.0	00	╛
Candidate Name		Catego	-								
Office Sought: House Disbu Senate President	rsement For: Primary General Other (specify)										
State: District:											
Full Name (Last, First, Middle Initial)  IHCA-PAC						<b>ction ID</b> Disburs	: SB29.2 ement	2571	7		
Mailing Address 1029 S. Fourth Street					07	/ D	27 /	ž	0 Ď 6	Y	
City Springfield	State Zip Code IL 72703			A	mount	t of Each	n Disburs	emen	t this F	erio	
Purpose of Disbursement Contribution				1 L				1	1000.0	00	
Candidate Name	L	Catego	-								
Senate President	rsement For: Primary General Other (specify)										
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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	23 28b	24 28c	25 X 29	26 30b	
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name.								
<ul> <li>NAME OF COMMITTEE (In Full)</li> </ul>	ie and address of any political co	minintee to	SUILUI CUIIII	11 6110111011	om such	COMMINUE		
HCR Manor Care PAC								
Full Name (Last, First, Middle Initial)			Trans	action ID	: SB29.2	25737		
A. Ohioans for Blackwell				of Disburs		V V V	V	
Mailing Address 172 East State Street 6th Floor			0 <sup>M</sup> 8		21 /	200	6	
City Columbus	State Zip Code OH 43215		Amou	nt of Each	Disburs	ement this	Period	
Purpose of Disbursement	40210		- [ ]			10000	.00	
Contribution								
Candidate Name		Category/ Type						
Office Sought: House Disburs Senate	ement For:    Primary   General							
President	Other (specify)							
State: District: Full Name (Last, First, Middle Initial)								
Senate Republican Campaign Committee				action ID of Disburs		25790		
Mailing Address P.O. Box 792			0 <sup>M</sup> 9	M / D	29 /	Ý ŽOŎ	6 <sup>Y</sup>	
	7.0.1							
City Harrisburg	State Zip Code PA 17108		Amou	nt of Each	n Disburs	ement this	Period	
Purpose of Disbursement Contribution						500	.00	
Candidate Name		Category/ Type						
Office Sought: House Disburs Senate President	ement For:  Primary  General  Other (specify) ▼							
State: District:								
Full Name (Last, First, Middle Initial)  State of Michigan Bureau of Elections				action ID of Disburs		25771		
Mailing Address 430 West Allegan			0 9	M / D	8 /	žoŏ	6 <sup>Y</sup>	
City Lansing	State Zip Code MI 48918		Amou	nt of Each	Disburs	ement this	Period	
Purpose of Disbursement Late Filing Fee		• •				50	.00	
Candidate Name	-	Category/ Type						
Office Sought: House Senate President State: District:	ement For:  Primary  General  Other (specify)							
SUBTOTAL of Disbursements This Page (optional)						10550.	00	
						23200.	00	
TOTAL This Period (last page this line number only	)					23200.	<del>V</del>	

Image# 26950562206 Form/Schedule: **SA16**This is a refund check for the Texas Freedom Fund Contribution that we made on 8/3/06 with check number 5445.
Transaction ID: **SA16.25797**The Congressman Joe Barton Committee inadvertently deposited the Texas Freedom Fund Contribution check of \$5,000 into their PAC account.